

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00059791	2 Total pages filed: 5559
3 COMMITTEE NAME ActBlue Texas		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/08/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 962017 Boston, MA 02196		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		George	
		NICKNAME	LAST SUFFIX
			Gilmer
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 962017 Boston, MA 02196		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 962017 Boston, MA 02196		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(617) 517-7600	
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> 10th day after campaign treasurer termination
		<input type="checkbox"/> Runoff	
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	10/27/2024		12/31/2024
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input type="checkbox"/> General	<input type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME ActBlue Texas	13 Filer ID (Ethics Commission Filers) 00059791
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Democrat
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,093,800.43
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,616,784.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

George Gilmer

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 5559

17 COMMITTEE NAME ActBlue Texas		18 Filer ID (Ethics Commission Filers) 00059791
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,093,800.43
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,616,784.98
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4629 Rpt: 4/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A, HOME NUMBER <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		9 Employer (See Instructions) CONDUENT INC.
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A, HOME NUMBER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) CONDUENT INC.
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A, HOME NUMBER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) CONDUENT INC.
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A MILLAR, HEATHER <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) ARMAND BAYOU NATURE CENTER
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A OREILLY, DEBORAH <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4629 Rpt: 5/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A RIDDELL, STEVEN <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76040	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) PRODUCT OWNER		9 Employer (See Instructions) SYNAPTIQ
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A RIDDELL, STEVEN <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) SYNAPTIQ
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A WALKER, JERIMI <hr/> Contributor address; City; State; Zip Code PALOS HILLS, IL 60465	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MATH PROFESSOR		Employer (See Instructions) MORAIN VALLEY CC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. MILLER, AALIYAH <hr/> Contributor address; City; State; Zip Code EAST HARTFORD, CT 06118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR COMMUNICATIONS MANAGER		Employer (See Instructions) CAPITOL REGION COUNCIL OF GOVERNMENTS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A. MILLER, AALIYAH <hr/> Contributor address; City; State; Zip Code EAST HARTFORD, CT 06118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR COMMUNICATIONS MANAGER		Employer (See Instructions) CAPITOL REGION COUNCIL OF GOVERNMENTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4629 Rpt: 6/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AANONSEN, LIN <hr/> 6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55114	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) MACALESTER COLLEGE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AANONSEN, LIN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55114	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MACALESTER COLLEGE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AANONSEN, LIN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55114	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MACALESTER COLLEGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AANONSEN, LIN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55114	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MACALESTER COLLEGE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AANONSEN, LIN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55114	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MACALESTER COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4629 Rpt: 7/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AANONSEN, LIN <hr/> 6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55114	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) MACALESTER COLLEGE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARONSON, LOIS <hr/> Contributor address; City; State; Zip Code BOERNE, TX 76008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARONSON, LOIS <hr/> Contributor address; City; State; Zip Code BOERNE, TX 76008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARVIG, CINDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARVIG, CINDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/4629 Rpt: 8/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARVIG, CINDY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78744		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARVIG, CINDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) KITCHEN PLANNER		Employer (See Instructions) IKEA
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AARVIG, CINDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) KITCHEN PLANNER		Employer (See Instructions) IKEA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABADJIAN, SCOTT	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code MENIFEE, CA 92586		
Principal occupation / Job title (See Instructions) OPERATIONS OFFICER		Employer (See Instructions) CLOUT CAPITAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABARCA, ONOFRE ANTONIO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code OAKLAND, CA 94601		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/4629 Rpt: 9/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABARCA, ONOFRE ANTONIO <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94601	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABBOTT, ELTON <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABBOTT, ELTON <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABBOTT, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABBRUZZESE, LAURA <hr/> Contributor address; City; State; Zip Code WACO, TX 76707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COUNSELING		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/4629 Rpt: 10/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABBRUZZESE, LAURA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76707	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) COUNSELING		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABEBE, TESHOME <hr/> Contributor address; City; State; Zip Code CHARLESTON, IL 61920	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) EIU
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABECASSIS, JULIETTE <hr/> Contributor address; City; State; Zip Code PEMBROKE PINES, FL 33029	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABER, LISA <hr/> Contributor address; City; State; Zip Code MARIPOSA, CA 95338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABER, LISA <hr/> Contributor address; City; State; Zip Code MARIPOSA, CA 95338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/4629 Rpt: 11/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABERG, ROBERT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75208	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABERG, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABERNATHY, MARIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABEYTIA, JAIME <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) SEIU TEXAS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABEYTIA, JAIME <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) SEIU TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/4629 Rpt: 12/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABIZAID, CHRISTY <hr/> 6 Contributor address; City; State; Zip Code MCLEAN, VA 22101	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABLE, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABLON, BARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) SOIL BUILDING SYSTEMS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABLON, BARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SOIL BUILDING SYSTEMS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABOU-SAYED, MIKHAL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GONGORA & SCHULTZ, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/4629 Rpt: 13/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMOWITZ, DAVID <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 91403	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMOWITZ, RICHARD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMOWITZ, RICHARD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RMA CONSULTANTS LLC
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMS, BARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BLANK ROME LLP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMS, JOYCE <hr/> Contributor address; City; State; Zip Code CAVE JUNCTION, OR 97523	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/4629 Rpt: 14/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMS, PHILIP <hr/> 6 Contributor address; City; State; Zip Code SAN CARLOS, CA 94070	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABRAMS, PHILIP <hr/> Contributor address; City; State; Zip Code SAN CARLOS, CA 94070	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABREU, RINEYDA <hr/> Contributor address; City; State; Zip Code NANTUCKET, MA 02554	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABSALOM, KATELYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) TEXAS WOMEN'S UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABUABARA, MAMA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/4629 Rpt: 15/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABUHAMAD, KARIM <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACAS, CHRISTINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) DIGITAL PRODUCT MANAGER		Employer (See Instructions) CHARLES SCHWAB
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACHEY, MICHAEL <hr/> Contributor address; City; State; Zip Code NORTH EASTON, MA 02356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) COMPASS MEDICAL
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACHEY, MICHAEL <hr/> Contributor address; City; State; Zip Code NORTH EASTON, MA 02356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) COMPASS MEDICAL
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACHEY, MICHAEL <hr/> Contributor address; City; State; Zip Code NORTH EASTON, MA 02356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) COMPASS MEDICAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/4629 Rpt: 16/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACHTERMANN, JEFF	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) IBM
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, LINDA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code COLUMBIA, SC 29223		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, LINDA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code COLUMBIA, SC 29223		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code COLUMBIA, SC 29223		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, M	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SYRACUSE, NY 13212		
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) OCWA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/4629 Rpt: 17/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, PAT <hr/> 6 Contributor address; City; State; Zip Code ONAWSY, MI 59765	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, SANDRA <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, SANDRA <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKERMAN, STUART <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKIE, KWABENA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) MANAGING PARTNER		Employer (See Instructions) COBALT DIGITAL MARKETING, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/4629 Rpt: 18/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKIE, KWABENA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$15.60
8 Principal occupation / Job title (See Instructions) MANAGING PARTNER		9 Employer (See Instructions) COBALT DIGITAL MARKETING, LLC
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACKLEY, JANE <hr/> Contributor address; City; State; Zip Code GAHANNA, OH 43230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACORD, KENT <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACORD, KENT <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACOSTA, EMMA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925-5111	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) EMMACOSTA CONSULTING SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/4629 Rpt: 19/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACOSTA, EMMA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79925-5111	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) EMMACOSTA CONSULTING SERVICES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACOSTA, JERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACOSTA, LAURINDA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SOCIAL SERVICES		Employer (See Instructions) HEALTH
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACOSTA, NELDA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACUNA, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLAIMS SERVICE REPRESENTATIVE		Employer (See Instructions) BEST CLAIMS SERVICE, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/4629 Rpt: 20/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACUNA, CRISTINA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77031		
8 Principal occupation / Job title (See Instructions) GENERAL MANAGER		9 Employer (See Instructions) CACTUS MUSIC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAIR, CRAIG	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) PROJECT MGR		Employer (See Instructions) OPEN ROAD RENEWABLES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAIR, DAVID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78709-1526		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) DAVID ADAIR
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAIR, SANDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) FILM EDITOR		Employer (See Instructions) FREE LANCE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAIR, SANDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) FILM EDITOR		Employer (See Instructions) FREE LANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/4629 Rpt: 21/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAME CLARK, LUCY <hr/> 6 Contributor address; City; State; Zip Code ELMENDORF, TX 78112	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) BEXAR COUNTY COUNTY CLERK		9 Employer (See Instructions) BEXAR COUNTY
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ALEXIS <hr/> Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CURNEY, FARMER, HOUSE, OSUNA & JACKSON
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ALEXIS <hr/> Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CURNEY, FARMER, HOUSE, OSUNA & JACKSON
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ALICE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, BRUCE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$46.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/4629 Rpt: 22/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, BRUCE	7 Amount of Contribution (\$) \$46.00
6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, BRUCE	Amount of Contribution (\$) \$46.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, BRUCE	Amount of Contribution (\$) \$46.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, CHRIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20012-2617		
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) THE LIBRARY OF CONGRESS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, CYNTHIA	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/4629 Rpt: 23/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ELOISE <hr/> 6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ELOISE <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ELOISE <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, GLORIA <hr/> Contributor address; City; State; Zip Code BECKVILLE, TX 75631	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, GLORIA <hr/> Contributor address; City; State; Zip Code BECKVILLE, TX 75631	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/4629 Rpt: 24/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JANESS <hr/> 6 Contributor address; City; State; Zip Code FENTON, MI 48430	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DSISD
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DSISD
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ACS INC
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DSISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/4629 Rpt: 25/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DSISD
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ACS INC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/4629 Rpt: 26/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code SEABROOK, TX 77586	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) MEDIA RELATIONS		9 Employer (See Instructions) UNIVERSITY OF MARYLAND
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, LENORA <hr/> Contributor address; City; State; Zip Code WARRENSVILLE HTS, OH 44128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, LEONARD <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, LEONARD <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MARY <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34102	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/4629 Rpt: 27/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MARY <hr/> 6 Contributor address; City; State; Zip Code NAPLES, FL 34102	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MARY <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34102	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MELISSA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) FROST
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA <hr/> Contributor address; City; State; Zip Code OLYMPIA, WA 98508	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA <hr/> Contributor address; City; State; Zip Code OLYMPIA, WA 98508	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/4629 Rpt: 28/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA	7 Amount of Contribution (\$) \$1.24
6 Contributor address; City; State; Zip Code OLYMPIA, WA 98508		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA	Amount of Contribution (\$) \$5.13
Contributor address; City; State; Zip Code OLYMPIA, WA 98508		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code OLYMPIA, WA 98508		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code OLYMPIA, WA 98508		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code OLYMPIA, WA 98508		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/4629 Rpt: 29/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA <hr/> 6 Contributor address; City; State; Zip Code OLYMPIA, WA 98508	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, ROBERTA <hr/> Contributor address; City; State; Zip Code OLYMPIA, WA 98508	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, SHARON <hr/> Contributor address; City; State; Zip Code WATERTOWN, MA 02472	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, SOPHIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, SOPHIE <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CAMPAIGN MANAGER		Employer (See Instructions) LAUREN ASHLEY SIMMONS CAMPAIGN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/4629 Rpt: 30/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, SUSANNA <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, ME 04103	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, TONY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CANDIDATE		Employer (See Instructions) HLPM INC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, VICKI <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75150-2953	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, VICTORIA A <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, VICTORIA A <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/4629 Rpt: 31/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, VICTORIA A	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, VICTORIA A	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, VICTORIA A	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, WANDA	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code HOUSTON, TX 77045		
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		Employer (See Instructions) HARRIS COUNTY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, WILL	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code KATY, TX 77494		
Principal occupation / Job title (See Instructions) TRIAL LAWYER		Employer (See Instructions) THE ADAMS LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/4629 Rpt: 32/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, YVETTE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code CYPRESS, TX 77429		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAN MEZA, JOVANY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code EL PASO, TX 79905		
Principal occupation / Job title (See Instructions) ADMINISTRATIVE SPECIALIST		Employer (See Instructions) THE CITY OF EL PASO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADCOCK, RICK	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SCHUH BROWNE P.C.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADCOCK, RICK	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SCHUH BROWNE P.C.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADCOCK, RICK	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SCHUH BROWNE P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/4629 Rpt: 33/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEMA, CORAL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEMA, CORAL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/4629 Rpt: 34/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/4629 Rpt: 35/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADEN, MARILYN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADINOFF, BRYON <hr/> Contributor address; City; State; Zip Code DENVER, CO 80209	Amount of Contribution (\$) \$200.48
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADJEI, ALVIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ABRAHAM, WATKINS, NICHOLS, SORRELS, AGOSTO &

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/4629 Rpt: 36/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADJEI, ALVIN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HKM EMPLOYMENT ATTORNEYS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKINSON, GLENDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756-3907	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISON-BROWN, DENISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISON-BROWN, DENISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISON-BROWN, DENISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISON-BROWN, DENISE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISON-BROWN, DENISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADKISON-BROWN, DENISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADLER, LUCY <hr/> Contributor address; City; State; Zip Code LUTHERVILLETIMONIUM, MD 21093	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADOLF, JURINE <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) KBR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/4629 Rpt: 38/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADRIAN, MIOHAEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78763	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AFFLERBACH, ELIZABETH <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGARD, RUPERT <hr/> Contributor address; City; State; Zip Code PALM COAST, FL 32137	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGHA, MAJED <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AGHA
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGHAMALIAN, BRANDON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) FOCUSED ADVOCACY, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/4629 Rpt: 39/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGHAMALIAN, BRANDON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) FOCUSED ADVOCACY, LLC
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGIEWICH, SUSAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) J.B. LAGS, INC.
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGOSTO, BERNARDINO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ABRAHAM WATKINS NICHOLS AGOSTO AZIZ & STOGNER
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUAYO, ELVIRA <hr/> Contributor address; City; State; Zip Code WESLACO, TX 78596	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, AURORA <hr/> Contributor address; City; State; Zip Code REDMOND, WA 98052	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) KUIPER AMAZON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/4629 Rpt: 40/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, FERNANDO <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) WHITLEY PENN LLC
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, FERNANDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) WHITLEY PENN LLC
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, KARA <hr/> Contributor address; City; State; Zip Code TULSA, OK 74105	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) CVENT
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, KARA <hr/> Contributor address; City; State; Zip Code TULSA, OK 74105	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) CVENT
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, LORRAINE <hr/> Contributor address; City; State; Zip Code SEA CLIFF, NY 11579	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) YOGA FLOW STUDIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/4629 Rpt: 41/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, TERESITA <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76501	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		9 Employer (See Instructions) UNC GREELEY 4100
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUILAR, YUMAIRA <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) HOSPITALITY		Employer (See Instructions) OMNI
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, ALMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PGP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, LIONEL B <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, MARSHA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/4629 Rpt: 42/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, MARSHA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, SHERRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ALLEGIANCE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, SHERRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) AZTEC
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE, SHERRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) AZTEC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHERN, JAMES <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/4629 Rpt: 43/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHERN, JAMES <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHLGREN, CAROL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMAD, JANICE <hr/> Contributor address; City; State; Zip Code COLFAX, WI 54730-2448	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMAD, SAMIYA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMED, FARHA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/4629 Rpt: 44/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMED, FARHA <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ATTY		9 Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMED, SARAH <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GENETIC COUNSELOR		Employer (See Instructions) LABCORP
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHMED, SARAH <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GENETIC COUNSELOR		Employer (See Instructions) LABCORP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHSAN, MUHAMMAD <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TREASURY		Employer (See Instructions) TENET HEALTHCARE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHUJA, SUNIL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/4629 Rpt: 45/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHUJA, SUNIL <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PHY		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHUJA, SUNIL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHY		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AIKMAN, FRED <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PORTER		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AIKMAN, FRED <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PORTER		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AIKMAN, KAREN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) TEA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/4629 Rpt: 46/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINA, GRANT <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79925	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSLIE, DAPHNY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSWORTH, ALAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSWORTH, ALAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSWORTH, CHARLENE <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RISK ANALYST		Employer (See Instructions) RLI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/4629 Rpt: 47/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSWORTH, LAURA <hr/> 6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) TEXAS HEALTH RESOURCES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSWORTH, LAURA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) TEXAS HEALTH RESOURCES
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AITCH, KIMBERLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HAIRSTYLIST		Employer (See Instructions) KIM AITCH CAMERA READY
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AITCH, KIMBERLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HAIRSTYLIST		Employer (See Instructions) KIM AITCH CAMERA READY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKBARI, CHRIS <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) ITEX GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, JULIE <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) THE BRYI'S PET SITTING
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, JULIE <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) THE BRYI'S PET SITTING
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, JULIE <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) THE BRYI'S PET SITTING
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKINS, GAIL <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKINS, MADELINE <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77338	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALAMAR, AMY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78732	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		9 Employer (See Instructions) GOORU
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS <hr/> Contributor address; City; State; Zip Code ROSEVILLE, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS <hr/> Contributor address; City; State; Zip Code ROSEVILLE, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS <hr/> Contributor address; City; State; Zip Code ROSEVILLE, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS <hr/> Contributor address; City; State; Zip Code ROSEVILLE, MN 55113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/4629 Rpt: 50/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code ROSEVILLE, MN 55113		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code ROSEVILLE, MN 55113		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code ROSEVILLE, MN 55113		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code ROSEVILLE, MN 55113		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code ROSEVILLE, MN 55113		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/4629 Rpt: 51/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANEN, DENNIS <hr/> 6 Contributor address; City; State; Zip Code ROSEVILLE, MN 55113	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, AMADO <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BGCA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, LINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) CONSULTANT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, SELINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF SELINA ALANIZ
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, SELINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF SELINA ALANIZ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/4629 Rpt: 52/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, SELINA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77003	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICE OF SELINA ALANIZ
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALARCON, SAMANTHA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STORE MANAGER		Employer (See Instructions) TORY BURCH
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBANO, POLA <hr/> Contributor address; City; State; Zip Code BK, NY 11201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBERS, HAROLD <hr/> Contributor address; City; State; Zip Code ART, TX 76820	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBERT, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) AUSTIN COMMUNITY COLLEGE		Employer (See Instructions) PROFESSOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/4629 Rpt: 53/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBERT, DAVID <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78741	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBERT, PAUL <hr/> Contributor address; City; State; Zip Code AKRON, OH 44333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBRITTON, MARY <hr/> Contributor address; City; State; Zip Code SARASOTA, FL 34235	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) COMPTROLLER		Employer (See Instructions) YOUR FARM AND GARDEN
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBRITTON, MARY <hr/> Contributor address; City; State; Zip Code SARASOTA, FL 34235	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) COMPTROLLER		Employer (See Instructions) YOUR FARM AND GARDEN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCANTAR, SALVADOR <hr/> Contributor address; City; State; Zip Code MISSION, TX 78572	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) OPTOMETRY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/4629 Rpt: 54/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCANTAR, SALVADOR <hr/> 6 Contributor address; City; State; Zip Code MISSION, TX 78572	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) OPTOMETRIST		9 Employer (See Instructions) OPTOMETRY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCOCER, DIANA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCORN, MARK <hr/> Contributor address; City; State; Zip Code DENTON TX, TX 76208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCORN, SALLIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CITY COUNCIL MEMBER		Employer (See Instructions) CITY OF HOUSTON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDERMAN, RICHARD <hr/> Contributor address; City; State; Zip Code ASHEVILLE, NC 28804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/4629 Rpt: 55/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDOUS, CHARLA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75219	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ALDOUS/WALKER LLP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEJANDRE, DONNA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90043	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) LAUSD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEJANDRO, VICTOR <hr/> Contributor address; City; State; Zip Code SCOTTS VALLEY, CA 95066	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT MANAGER		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, CHARLES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) TEACHERS
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, CHARLES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) TEACHERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/4629 Rpt: 56/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, DAX <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOFTWARE SUPPORT PROGRAMMER		9 Employer (See Instructions) QUADAX
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, DAX <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE SUPPORT PROGRAMMER		Employer (See Instructions) QUADAX
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, DIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) CFISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, DIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) CFISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JERI JO <hr/> Contributor address; City; State; Zip Code MONTGOMERY, AL 36117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/4629 Rpt: 57/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JERI JO <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, AL 36117	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JERI JO <hr/> Contributor address; City; State; Zip Code MONTGOMERY, AL 36117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JERI JO <hr/> Contributor address; City; State; Zip Code MONTGOMERY, AL 36117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JIM <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, JULIE <hr/> Contributor address; City; State; Zip Code NEEDVILLE, TX 77461	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) NOV

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/4629 Rpt: 58/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, KIMBERLY <hr/> 6 Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LABOR MANAGEMENT SPECIALIST		9 Employer (See Instructions) SUNRISE SENIOR LIVING
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, KIMBERLY <hr/> Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LABOR MANAGEMENT SPECIALIST		Employer (See Instructions) SUNRISE SENIOR LIVING
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, MARIA <hr/> Contributor address; City; State; Zip Code COVINGTON, GA 30016-4621	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) FINANCE MANAGER		Employer (See Instructions) GA DEPT OF TRANSPORTATION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, SUSAN <hr/> Contributor address; City; State; Zip Code WOODSTOCK, NY 12498	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, SUSAN <hr/> Contributor address; City; State; Zip Code WOODSTOCK, NY 12498	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/4629 Rpt: 59/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code WOODSTOCK, NY 12498	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, WAYNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER-KASPARIK, ROSALIND <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFANO, PHYLLIS <hr/> Contributor address; City; State; Zip Code BOCA RATON, FL 33434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFANO, PHYLLIS <hr/> Contributor address; City; State; Zip Code BOCA RATON, FL 33434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/4629 Rpt: 60/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFANO, PHYLLIS <hr/> 6 Contributor address; City; State; Zip Code BOCA RATON, FL 33434	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFANO, PHYLLIS <hr/> Contributor address; City; State; Zip Code BOCA RATON, FL 33434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFARO, A J <hr/> Contributor address; City; State; Zip Code OAKLAND, NJ 07436	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MICROSOFT CERTIFIED TRAINER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFARO, MICAELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BAKER BOTTS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFARO, MICAELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BAKER BOTTS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/4629 Rpt: 61/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFIERI, PAUL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFIERI, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFORD, BARBARA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALFORD, VIVIAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALGE, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CSISD

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/4629 Rpt: 62/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALGE, AMY <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) CSISD
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALGE, AMY <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CSISD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALHAMMOURI, OMAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		Employer (See Instructions) THOMPSON ENGINEERING
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALI, IMAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALI, IQBAL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/4629 Rpt: 63/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALI, RAHIM <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) 51ST INC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALI, RAO <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALICEA, BRENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALIX, KAYLA <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) IT BUSINESS ANALYST		Employer (See Instructions) CENTERPOINT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLARD, EDWARD <hr/> Contributor address; City; State; Zip Code BERWYN, IL 60402	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BUNGE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/4629 Rpt: 64/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLAWAY, DENISE <hr/> 6 Contributor address; City; State; Zip Code LAKE GENEVA, WI 53147	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLAWAY, DENISE <hr/> Contributor address; City; State; Zip Code LAKE GENEVA, WI 53147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLAWAY, DENISE <hr/> Contributor address; City; State; Zip Code LAKE GENEVA, WI 53147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLAWAY, DENISE <hr/> Contributor address; City; State; Zip Code LAKE GENEVA, WI 53147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLDREDGE, NICOLE <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC ENGAGEMENT AND COMMUNICATIONS		Employer (See Instructions) HNTB CORP.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/4629 Rpt: 65/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLDREDGE, NICOLE <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PUBLIC ENGAGEMENT AND COMMUNICATIONS		9 Employer (See Instructions) HNTB CORP.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEGOREN, DAVID <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95618	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BONNIE <hr/> Contributor address; City; State; Zip Code PETALUMA, CA 94952	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRUCE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRUCE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/4629 Rpt: 66/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRUCE <hr/> 6 Contributor address; City; State; Zip Code WOODWAY, TX 76712	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRUCE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CARROLL <hr/> Contributor address; City; State; Zip Code SACHSE, TX 75048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CARYN <hr/> Contributor address; City; State; Zip Code FOREST HILLS, NY 11375	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CARYN <hr/> Contributor address; City; State; Zip Code FOREST HILLS, NY 11375	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/4629 Rpt: 67/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CARYN <hr/> 6 Contributor address; City; State; Zip Code FOREST HILLS, NY 11375	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CARYN <hr/> Contributor address; City; State; Zip Code FOREST HILLS, NY 11375	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CATHERINE <hr/> Contributor address; City; State; Zip Code MOORPARK, CA 93021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CATHERINE <hr/> Contributor address; City; State; Zip Code MOORPARK, CA 93021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/4629 Rpt: 68/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, EDWARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) FINANCE		9 Employer (See Instructions) EAGLE GLOBAL ADVISORS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, GLENN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) PREMIER VISION OF DALLAS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/4629 Rpt: 69/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KAREN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) OPTOMETRIST		9 Employer (See Instructions) PREMIER VISION OF DALLAS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) PREMIER VISION OF DALLAS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) PREMIER VISION OF DALLAS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) PREMIER VISION OF DALLAS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) PREMIER VISION OF DALLAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/4629 Rpt: 70/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, KENNETH <hr/> 6 Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LAURA <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LAURA <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LAURA <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LAURA <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 76548	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/4629 Rpt: 71/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LAURA <hr/> 6 Contributor address; City; State; Zip Code LIBERTY HILL, TX 76548	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LINDA <hr/> Contributor address; City; State; Zip Code SARATOGA, CA 95070	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LINDA D <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LINDA D <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, LYDIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206-4409	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SMU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/4629 Rpt: 72/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, PATRICE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77045	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) HISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, ROBERT <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DIAGNOSTIC RADIOLOGIST		Employer (See Instructions) RAD PARTNERS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/4629 Rpt: 73/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SEQUIM, WA 98382		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEQUIM, WA 98382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEQUIM, WA 98382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEQUIM, WA 98382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, STELLA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SEQUIM, WA 98382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/4629 Rpt: 74/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, TARA <hr/> 6 Contributor address; City; State; Zip Code MANSFIELD, TX 76063-1676	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, WAYNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN BARROW, STACY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) DISTRICT COURTS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN COX, DEANNA <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90807	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN II, ERROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NASA		Employer (See Instructions) FINANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/4629 Rpt: 75/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN RAMPRASAD, MARY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) THE COLE LAW FIRM
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN WREN, CHARMESHIA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SPRING, TX 77379		
Principal occupation / Job title (See Instructions) HOSPITAL ADMIN		Employer (See Instructions) NEXUS
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN-SAVIETTA, CORA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78752		
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) BERRY CONSULTANTS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIE, LUANN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code TOOELE, UT 84074		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIN, VIRGINIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TRINITY CENTER, CA 96091		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/4629 Rpt: 76/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIN, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code TRINITY CENTER, CA 96091	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIN, VIRGINIA E <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIN, VIRGINIA E <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIN, VIRGINIA E <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLIO, DON <hr/> Contributor address; City; State; Zip Code CITRUS HEIGHTS, CA 95610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/4629 Rpt: 77/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLISON, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75006	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLMON, CECILY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLOWAY, JUDY <hr/> Contributor address; City; State; Zip Code LARGO, FL 33773	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLOWAY, JUDY <hr/> Contributor address; City; State; Zip Code LARGO, FL 33773	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLOWAY, JUDY <hr/> Contributor address; City; State; Zip Code LARGO, FL 33773	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/4629 Rpt: 78/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLOWAY, JUDY <hr/> 6 Contributor address; City; State; Zip Code LARGO, FL 33773	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLRED, JEAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) ALLRED CREATES
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLSUP, ASHLEA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-7200	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SAHM		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/4629 Rpt: 79/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77077		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLYN, TAMMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/4629 Rpt: 80/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALMADA, FRANCISCO	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79925		
8 Principal occupation / Job title (See Instructions) SERGEANT		9 Employer (See Instructions) CONSTABLE, PRECINCT 1
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALMADA, FRANCISCO	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EL PASO, TX 79925		
Principal occupation / Job title (See Instructions) SERGEANT		Employer (See Instructions) CONSTABLE, PRECINCT 1
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALMADA, FRANCISCO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) CONSTABLE-ELECT		Employer (See Instructions) EL PASO COUNTY
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALMAGUER, GLADYS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE TX, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALMAGUER, GLADYS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE TX, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/4629 Rpt: 81/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALMASSI, CAROL <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALONSO, AMBER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALONSO, VICTOR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALONZO, CELIA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) STAFFER		Employer (See Instructions) REP. RAMON
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALONZO, VICTORIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79905	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/4629 Rpt: 82/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALPERN, LOUIS <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALSDORF, MARY <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALSUP, MARION <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALSUP, MAUREEN <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTEMUS, KATHLEEN <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NANNY		Employer (See Instructions) JOSHUA KWISINSKI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/4629 Rpt: 83/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTER, CHARMAINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77089	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) CRAWFORD & COMPANY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTLAND, JOHN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) COMCAST
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTMAN, JULIE <hr/> Contributor address; City; State; Zip Code LAKELINE, OH 44095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTMAN, MARK <hr/> Contributor address; City; State; Zip Code WOODBOURNE, NY 12788	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALTSHELER, BARBARA <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63132-2019	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/4629 Rpt: 84/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVARADO, MELISSA <hr/> 6 Contributor address; City; State; Zip Code ORLANDO, FL 32827	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRODUCT MANAGER		9 Employer (See Instructions) RIOT GAMES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVARADO, STATE SENATOR CAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77223	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) STATE SENATOR		Employer (See Instructions) STATE OF TEXAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVARADO, STATE SENATOR CAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77223	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) STATE SENATOR		Employer (See Instructions) STATE OF TEXAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, ALVA <hr/> Contributor address; City; State; Zip Code PECOS, TX 79772	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) REEVES COUNTY
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, ALVA <hr/> Contributor address; City; State; Zip Code PECOS, TX 79772	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) REEVES COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/4629 Rpt: 85/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, LORENA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) CHRISTUS HEALTH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVAREZ, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75211-1843	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) NCTCOG
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVOID, LEE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVOID, LEE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALVOID, LEE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/4629 Rpt: 86/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> 6 Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROPERTY MANGR		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROPERTY MANGR		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROPERTY MANGR		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROPERTY MANGR		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROPERTY MANGR		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/4629 Rpt: 87/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> 6 Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROPERTY MANGR		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALWARD, BARBARA <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROPERTY MANGR		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALYASIN, AHMAD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CHAIRMAN AND CEO		Employer (See Instructions) OPTIMA GLOBAL FINANCIAL
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALYASIN, AHMAD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CHAIRMAN AND CEO		Employer (See Instructions) OPTIMA GLOBAL FINANCIAL
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMADOR, BENITO <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/4629 Rpt: 88/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMADOR, BENITO <hr/> 6 Contributor address; City; State; Zip Code SEGUIN, TX 78155	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMADOR, PABLO <hr/> Contributor address; City; State; Zip Code LA MESA, CA 91941	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMADOR, VICTOR <hr/> Contributor address; City; State; Zip Code UPLAND, CA 91786	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMARO DIAZ, ABIUD <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90069	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMATO, DOLORES <hr/> Contributor address; City; State; Zip Code FRESNO, CA 93710	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) LMFT		Employer (See Instructions) SELF

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/4629 Rpt: 89/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMAZONAS, LEE <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94705	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMBAUEN, LINDA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98168	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOSPITALITY		Employer (See Instructions) LINDA AMBAUEN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMBROSE, REBECCA <hr/> Contributor address; City; State; Zip Code WEST SACRAMENTO, CA 95605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF CALIFORNIA-DAVIS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMBROSE-BAZILE, JERRALYN <hr/> Contributor address; City; State; Zip Code HARVEY, LA 70058	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMENDOLA, SALLY <hr/> Contributor address; City; State; Zip Code SANGER, TX 76266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/4629 Rpt: 90/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMENDOLA, SALLY <hr/> 6 Contributor address; City; State; Zip Code SANGER, TX 76266	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMENDOLA, SALLY <hr/> Contributor address; City; State; Zip Code SANGER, TX 76266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMEZQUITA, LILLIAN <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) INDEPENDENT CONTRACTOR
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMIN, AFTAB <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) STREAMSOFT INC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMIN, FAISAL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) BERKELEY RESEARCH GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/4629 Rpt: 91/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMIN, JAMES	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LIVONIA, MI 48150		
8 Principal occupation / Job title (See Instructions) SERVER ENGINEER		9 Employer (See Instructions) FORD MOTOR COMPANY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMMONS, ROBERT	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) AMMONS LAW FIRM
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMODEO, ADELE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALBANY, CA 94706		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMOS-MCGEHEE, AUDREY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMOS-MCGEHEE, AUDREY	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/4629 Rpt: 92/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMOS-MCGEHEE, AUDREY <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMPER, TINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TINA AMPE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMY, AMY <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89169	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FOOD RUNNER		Employer (See Instructions) RW LAS VEGAS
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANASSI, ENOCK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHARMACY		Employer (See Instructions) HARRISHEALTH
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANCIRA, APRIL <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) ANCIRA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/4629 Rpt: 93/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANCIRA, JESSE <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANCIS, MIRIAM <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11217	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSEN, ALLAN <hr/> Contributor address; City; State; Zip Code ASHLAND, OH 44805	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSEN, CAITLIN <hr/> Contributor address; City; State; Zip Code FAIRFIELD, CA 94534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSOCIATE		Employer (See Instructions) STANFORD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSEN, CAITLIN <hr/> Contributor address; City; State; Zip Code FAIRFIELD, CA 94534	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSOCIATE		Employer (See Instructions) STANFORD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/4629 Rpt: 94/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSEN, CAITLIN <hr/> 6 Contributor address; City; State; Zip Code FAIRFIELD, CA 94534	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSOCIATE		9 Employer (See Instructions) STANFORD
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, AMELIA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, AMY <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, BJ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DOG WALKER		Employer (See Instructions) ROVER.COM
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, BJ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DOG WALKER		Employer (See Instructions) ROVER.COM

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/4629 Rpt: 95/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, BRIAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704-4706	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) GENERAL MANAGER		9 Employer (See Instructions) MEDICI ROASTING
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, BRUCE <hr/> Contributor address; City; State; Zip Code PLANTATION, FL 33313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, BRUCE <hr/> Contributor address; City; State; Zip Code PLANTATION, FL 33313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, BRUCE <hr/> Contributor address; City; State; Zip Code PLANTATION, FL 33313	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, CLAIRE <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63122	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/4629 Rpt: 96/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, CLAIRE <hr/> 6 Contributor address; City; State; Zip Code ST LOUIS, MO 63122	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, CLIFF <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, CLIFFORD <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, CLIFFORD <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) STRIVE PUBLIC POLICY RESOURCES, LLC

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/4629 Rpt: 97/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, DOUG <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) VICE PRESIDENT		9 Employer (See Instructions) METHODIST HEALTH SYSTEM FOUNDATION
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, DOUG <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) METHODIST HEALTH SYSTEM FOUNDATION
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, ERIC <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, ERIC <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, ERIC <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/4629 Rpt: 98/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, ERIC <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98103	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, GAY-DEE <hr/> Contributor address; City; State; Zip Code SURPRISE, AZ 85387	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, GAY-DEE <hr/> Contributor address; City; State; Zip Code SURPRISE, AZ 85387	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, GREG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) AFFORDABLE HOMEOWNERSHIP		Employer (See Instructions) AUSTIN HABITAT FOR HUMANITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, ISABELLE <hr/> Contributor address; City; State; Zip Code MARRIOTTSVILLE, MD 21104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS COACH		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/4629 Rpt: 99/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, JEAN <hr/> 6 Contributor address; City; State; Zip Code SISTERS, OR 97759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, JENNIFER <hr/> Contributor address; City; State; Zip Code FLORAL PARK, NY 11001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, KAY <hr/> Contributor address; City; State; Zip Code AURORA, IL 60506	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, KELLY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) WEBSITE MANAGER		Employer (See Instructions) USAA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, KENNETH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/4629 Rpt: 100/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, KIRK (HOME)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code COLUMBUS, TX 78934-2001	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, KIRK (HOME)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code COLUMBUS, TX 78934-2001	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, LARS	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code CARROLLTON, TX 75007	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, NATALIE	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SEATTLE, WA 98106	
Principal occupation / Job title (See Instructions) HR PARTNER		Employer (See Instructions) AMAZON
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, PATRICIA	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code APEX, NC 27502	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/4629 Rpt: 101/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, PORTER W JR <hr/> 6 Contributor address; City; State; Zip Code MIAMI, FL 33129	7 Amount of Contribution (\$) \$10.12
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, RAY <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, RICKY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ANDERSON & SMITH PC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, ROBERT <hr/> Contributor address; City; State; Zip Code COLUMBIA, SC 29212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SAM <hr/> Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/4629 Rpt: 102/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SAM <hr/> 6 Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91401	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SAM <hr/> Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SAMUEL <hr/> Contributor address; City; State; Zip Code CARRBORO, NC 27510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SAMUEL <hr/> Contributor address; City; State; Zip Code CARRBORO, NC 27510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SARAH <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DEVELOPMENT COORDINATOR		Employer (See Instructions) PRESERVATION AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SARAH <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) DEVELOPMENT COORDINATOR		9 Employer (See Instructions) PRESERVATION AUSTIN
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SARAH <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DEVELOPMENT COORDINATOR		Employer (See Instructions) PRESERVATION AUSTIN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/4629 Rpt: 104/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78717	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHERMAN BRUCE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		Employer (See Instructions) INFOVU TECHNOLOGIES LLC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHERMAN BRUCE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		Employer (See Instructions) INFOVU TECHNOLOGIES LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SUSAN <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85716-2325	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, VALERIE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code WACO, TX 76707		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, WILLIAM	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOPKINS, MN 55343		
Principal occupation / Job title (See Instructions) VIDEO PRODUCER		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON III, DAVID	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77002		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) HEIST AGENCY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRADE, ALEX	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) BULLE ROCK		Employer (See Instructions) FINANCE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRADE, HOPE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205		
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRES, JULIA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code MOUNT PLEASANT, SC 29464		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRES-TYSCH, EZRA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90004		
Principal occupation / Job title (See Instructions) DIGITAL STRATEGIST		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREU, DENISE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREU, DENISE	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code BROOKLYN, NY 11210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREU, DENISE	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code BROOKLYN, NY 11210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREU, DENISE <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11210	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, CHERITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77031-3015	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CXO		Employer (See Instructions) MV ENGINEERING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, COURTNEY <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VET TECH		Employer (See Instructions) SAFETY CALL INTERNATIONAL
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, IRENE <hr/> Contributor address; City; State; Zip Code NOLANVILLE, TX 76550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, IRENE <hr/> Contributor address; City; State; Zip Code NOLANVILLE, TX 76550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/4629 Rpt: 108/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, KELLEY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77018	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) HARRIS COUNTY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, KELLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, KELLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, KELLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, LAURA <hr/> Contributor address; City; State; Zip Code MANTEE, MS 39751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) MSU

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, MELISSA <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, PRENTISS & FRANCEY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, PRENTISS & FRANCEY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, SHEILA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TIADA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREWS, SHEILA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TIADA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/4629 Rpt: 110/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRIES, EVA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRIES, EVA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRIES, EVA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDRIES, EVA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGEL, LYNNE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) LIA, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/4629 Rpt: 111/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGEL, NORRY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77023	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) AMERICAN LEADERSHIP FORUM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGEL, SUE <hr/> Contributor address; City; State; Zip Code SOLANA BEACH, CA 92075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGELL-MCCREADY, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FINANCIAL EXAMINER		Employer (See Instructions) TEXAS DEPARTMENT OF BANKING
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGELL-MCCREADY, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FINANCIAL EXAMINER		Employer (See Instructions) TEXAS DEPARTMENT OF BANKING
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGELOVICH, JEFFREY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NIX PATTERSON, LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/4629 Rpt: 112/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANGLE, GEORGE <hr/> 6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75051	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANKER, LAURA <hr/> Contributor address; City; State; Zip Code STONE RIDGE, NY 12484	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANN ESTRADA, LAURA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CORPUS CHRISTI ISD
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANN ESTRADA, LAURA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CORPUS CHRISTI ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANNAN, ALEXANDER <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/4629 Rpt: 113/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANNIS, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77389	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANNIS, MARIANNE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77389	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANNUNZIATA, DIANE <hr/> Contributor address; City; State; Zip Code NORTH SALEM, NY 10560	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DIANE ANNUNZIATA
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANNUNZIATA, DIANE <hr/> Contributor address; City; State; Zip Code NORTH SALEM, NY 10560	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANSELMO, NICKI <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60642	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CHICAGO PUBLIC SCHOOLS

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/4629 Rpt: 114/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANSLEY, DONALD <hr/> 6 Contributor address; City; State; Zip Code CHARLTON, MA 01507	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTELO, CRISTINA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20001	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTY		Employer (See Instructions) FEROX
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTHONY, MICHAEL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) OPERA SINGER		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTIN, QUEALY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTON, MERRIESSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/4629 Rpt: 115/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONAKOS, JETTA <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98133	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/4629 Rpt: 116/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77339	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTONE, FELIX <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTWINE, KRISTINE <hr/> Contributor address; City; State; Zip Code LAS CRUCES, NM 88001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/4629 Rpt: 117/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTWINE, KRISTINE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LAS CRUCES, NM 88001		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANTWINE, KRISTINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAS CRUCES, NM 88001		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANZALOTTA, LEA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BULVERDE, TX 78163		
Principal occupation / Job title (See Instructions) LANDSCAPE DESIGN		Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANZALOTTA, LEA	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code BULVERDE, TX 78163		
Principal occupation / Job title (See Instructions) LANDSCAPE DESIGN		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APIRIAN, MARILYN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ARNOLD, MD 21012		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/4629 Rpt: 118/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APODACA, ALIANA	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79902-5330		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) POSITIVE DIRECTIONS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APODACA, MICHAEL	Amount of Contribution (\$) \$224.56
Contributor address; City; State; Zip Code EL PASO, TX 79902		
Principal occupation / Job title (See Instructions) EL PASO COUNTY DEMOCRATIC PARTY		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APOLINARIO, PATRICIA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code TRACY, CA 95377		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SAN JOAQUIN GENERAL HOSPITAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APONE, JAMES	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code ANCHORAGE, AK 99524		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APONE, JAMES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ANCHORAGE, AK 99524		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/4629 Rpt: 119/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPEL, MARK <hr/> 6 Contributor address; City; State; Zip Code JAMESTOWN, CA 95327	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MARKETING CONTRACTOR		9 Employer (See Instructions) MARK APPEL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPEL, MARK <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94590	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MARKETING CONTRACTOR		Employer (See Instructions) MARK APPEL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPELT, JUDY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEMAN, GORDON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HOLLAND & KNIGHT LLP
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLETON, BETSY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) UNIVERSITY OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/4629 Rpt: 120/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLETON, BETSY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78702	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) UNIVERSITY OF TEXAS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEWHAITE, JOHN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEWHAITE, JOHN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEWHAITE, JOHN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APTED, JANIS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/4629 Rpt: 121/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APTED, JANIS	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77057		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APTON, LINDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LOS LUNAS, NM 87031		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAMINO, MARISELA	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) OFFICE CLERK		Employer (See Instructions) TARRANT COUNTY
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAMINO, MARISELA	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) OFFICE CLERK		Employer (See Instructions) TARRANT COUNTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAMINO, MARISELA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS AND VOTER OUTREACH		Employer (See Instructions) TARRANT COUNTY DEMOCRATIC PARTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/4629 Rpt: 122/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAMINO, MARISELA <hr/> 6 Contributor address; City; State; Zip Code MANSFIELD, TX 76063	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) OFFICE CLERK		9 Employer (See Instructions) TARRANT COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARANAS, STEFFANI <hr/> Contributor address; City; State; Zip Code ASHLAND, OR 97520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP OPERATIONS		Employer (See Instructions) CELERITY CONSULTING GROUP
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAUJO, FRANK <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 92595	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAUJO, FRANK <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 92595	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARAUJO, MANUEL <hr/> Contributor address; City; State; Zip Code BLUE RIDGE, TX 75424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES REP		Employer (See Instructions) HARRIS GOVERN

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/4629 Rpt: 123/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARBOUR, ALICE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARBUCKLE, LINDA <hr/> Contributor address; City; State; Zip Code SOMERVILLE, TX 77879	Amount of Contribution (\$) \$25.99
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCE, MARGARET <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCHER, AMY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CONIFER HEALTH SOLUTIONS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCHER, AMY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CONIFER HEALTH SOLUTIONS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/4629 Rpt: 124/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCHER, AURORA	7 Amount of Contribution (\$) \$10.70
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703		
8 Principal occupation / Job title (See Instructions) FOUNDER + CEO		9 Employer (See Instructions) ABUNDANCE PRODUCTIONS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCHER, AURORA	Amount of Contribution (\$) \$10.70
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) FOUNDER + CEO		Employer (See Instructions) ABUNDANCE PRODUCTIONS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/4629 Rpt: 125/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY <hr/> 6 Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY <hr/> Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY <hr/> Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARCUS-ARTH, AMY <hr/> Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY <hr/> Contributor address; City; State; Zip Code BELLVILLE, TX 77418	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/4629 Rpt: 126/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code BELLVILLE, TX 77418		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code BELLVILLE, TX 77418		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code BELLVILLE, TX 77418		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code BELLVILLE, TX 77418		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code BELLVILLE, TX 77418		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/4629 Rpt: 127/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARDINGTON, AMY <hr/> 6 Contributor address; City; State; Zip Code BELLVILLE, TX 77418	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARECHIGA, JASON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) THE NRP GROUP
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARELLANO, JACQUELYN <hr/> Contributor address; City; State; Zip Code CASTROVILLE, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INVESTIGATOR		Employer (See Instructions) DFPS
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARELLANO, JACQUELYN <hr/> Contributor address; City; State; Zip Code CASTROVILLE, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INVESTIGATOR		Employer (See Instructions) DFPS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARELLANO, MARGARITA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/4629 Rpt: 128/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARELLANO, MARTHA <hr/> 6 Contributor address; City; State; Zip Code MISSION VIEJO, CA 92691	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ELIG TECH		9 Employer (See Instructions) COUNTY OF ORANGE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARENAS, ANDRAGALE <hr/> Contributor address; City; State; Zip Code ST AUGUSTINE, FL 32092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARENAS, ANDRAGALE <hr/> Contributor address; City; State; Zip Code ST AUGUSTINE, FL 32092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARENBERG, MIRIAM <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21209	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARENS, KATHERINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) U OF TEXAS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/4629 Rpt: 129/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREVALO, CARINA <hr/> 6 Contributor address; City; State; Zip Code ALTADENA, CA 91001	7 Amount of Contribution (\$) \$10.70
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions) VIVERO CARI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREVALOS, ANDREA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BEXAR COUNTY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREVALOS, ANDREA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BEXAR COUNTY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREVALOS, ANDREA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BEXAR COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREY, MARY <hr/> Contributor address; City; State; Zip Code SALISBURY, NC 28146	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREY, MARY <hr/> 6 Contributor address; City; State; Zip Code SALISBURY, NC 28146	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREY, MARY <hr/> Contributor address; City; State; Zip Code SALISBURY, NC 28146	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/4629 Rpt: 131/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARLEDGE, WADE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMANI, JULIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064-5347	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMANT, RON <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76006-6632	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) ARMANT INDUSTRIES LLC
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMELIN, RENICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHILANTHROPY		Employer (See Instructions) ARNOLD VENTURES
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMELIN, RENICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHILANTHROPY		Employer (See Instructions) ARNOLD VENTURES
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENDARIZ, ARISTOTLE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> Contributor address; City; State; Zip Code HANSVILLE, WA 98340	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> 6 Contributor address; City; State; Zip Code HANSVILLE, WA 98340	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> Contributor address; City; State; Zip Code HANSVILLE, WA 98340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> Contributor address; City; State; Zip Code HANSVILLE, WA 98340	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> Contributor address; City; State; Zip Code HANSVILLE, WA 98340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> Contributor address; City; State; Zip Code HANSVILLE, WA 98340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/4629 Rpt: 134/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code HANSVILLE, WA 98340		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code HANSVILLE, WA 98340		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HANSVILLE, WA 98340		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HANSVILLE, WA 98340		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HANSVILLE, WA 98340		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/4629 Rpt: 135/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENI, DIANE <hr/> 6 Contributor address; City; State; Zip Code HANSVILLE, WA 98340	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENIA, MARY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENIA, MARY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMENIA, MARY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, CONNIE <hr/> Contributor address; City; State; Zip Code WINDERMERE, FL 34786	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, CONNIE <hr/> 6 Contributor address; City; State; Zip Code WINDERMERE, FL 34786	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, CONNIE <hr/> Contributor address; City; State; Zip Code WINDERMERE, FL 34786	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, DANA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98112	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) FREELANCE COPYEDITOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, JULIANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNERH		Employer (See Instructions) HOME DEPOT
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, JULIANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNERH		Employer (See Instructions) HOME DEPOT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/4629 Rpt: 137/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, JULIANNE <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LIGHTING DESIGNERH		9 Employer (See Instructions) HOME DEPOT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, KATHLEEN <hr/> Contributor address; City; State; Zip Code CARMELBYTHESEA, CA 93923	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, MARINA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) TOUCH OF CLASS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, NANCY <hr/> Contributor address; City; State; Zip Code WHEATON, IL 60189	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, SHARON <hr/> Contributor address; City; State; Zip Code HOTCHKISS, CO 81419	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/4629 Rpt: 138/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, TERRY	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code MERKEL, TX 79536	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, TERRY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MERKEL, TX 79536	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, TERRY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code MERKEL, TX 79536	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNEMANN, CHERYL	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ROSWELL, GA 30075	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNEMANN, CHERYL	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ROSWELL, GA 30075	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/4629 Rpt: 139/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNESEN, SUSAN <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) HAIR STYLIST		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNESON, JUDY <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27514	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, ADRIENNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628-3859	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, CHERRI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VET TECH		Employer (See Instructions) UNEMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, DAWN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/4629 Rpt: 140/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, KURT 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ARNOLD & ITKIN LLP
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, KURT Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ARNOLD & ITKIN LLP
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, KURT Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ARNOLD & ITKIN LLP
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, KURT Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ARNOLD & ITKIN LLP
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE Contributor address; City; State; Zip Code BRYAN, TX 77808	Amount of Contribution (\$) \$103.95
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHET		Employer (See Instructions) ESS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/4629 Rpt: 141/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BRYAN, TX 77808		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BRYAN, TX 77808		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BRYAN, TX 77805		
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		Employer (See Instructions) TEXAS A&M UNIVERSITY, ESSM DEPARTMENT
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code BRYAN, TX 77805		
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		Employer (See Instructions) TEXAS A&M UNIVERSITY, ESSM DEPARTMENT
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BRYAN, TX 77805		
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		Employer (See Instructions) TEXAS A&M UNIVERSITY, ESSM DEPARTMENT

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/4629 Rpt: 142/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77805	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		9 Employer (See Instructions) TEXAS A&M UNIVERSITY, ESSM DEPARTMENT
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) STRATEGY & DEVELOPMENT		Employer (See Instructions) HOUSTON RECOVERY CENTER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, SAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) LIAISON RESOURCES
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, WILLIAM <hr/> Contributor address; City; State; Zip Code TEXARKANA, TX 75503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ROOFER		Employer (See Instructions) CHELLA ROOFING
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNOLD, WILLIAM <hr/> Contributor address; City; State; Zip Code TEXARKANA, TX 75503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ROOFER		Employer (See Instructions) CHELLA ROOFING

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/4629 Rpt: 143/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNZEN, MAUNA <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94104	7 Amount of Contribution (\$) \$3.88
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) TARLSON & ASSOCIATES
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARNZEN, MAUNA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94104	Amount of Contribution (\$) \$3.88
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TARLSON & ASSOCIATES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARON, RITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARON, RITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARONSON, HARVEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARONSON, HENRY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BROOKLYN, NY 11218		
8 Principal occupation / Job title (See Instructions) MUSICIAN		9 Employer (See Instructions) FREELANCE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARONSON, HENRY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11218		
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) FREELANCE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRATIA, NORMA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CGI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRATIA, NORMA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) ECOMMERCE ANALYST		Employer (See Instructions) THE JUDGE GROUP
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRATIA, NORMA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CGI

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRATIA, NORMA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75228	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ECOMMERCE ANALYST		9 Employer (See Instructions) THE JUDGE GROUP
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRATIA, NORMA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CGI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRINGTON, CARYN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRINGTON, CARYN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARRIOLA, BENJAMIN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SOUTHWEST UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARROWSMITH, MARIE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RESEARCH ANALYST		9 Employer (See Instructions) SANDIA LABS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARROWSMITH, MARIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCH ANALYST		Employer (See Instructions) SANDIA LABS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARROYO, RAMON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARSLAN, MUSTAFA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) ENGENEER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARUMUGHAM, VISA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASCHNER, JUDY <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASEN, SCOTT <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10017	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASH, ARLENE <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HEALTH CARE STATISTICS		Employer (See Instructions) UMASS MEDICAL SCHOOL
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASH, ARLENE <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HEALTH CARE STATISTICS		Employer (See Instructions) UMASS MEDICAL SCHOOL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASH, BARBARA <hr/> Contributor address; City; State; Zip Code CLARKSBURG, WV 26301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/4629 Rpt: 148/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHBROOK, JONI <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) BASTROP ISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHBROOK, JONI <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BASTROP ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHBY, CHARMON <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95148	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHCRAFT, RACHEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$68.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TGTG
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHCRAFT, RACHEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$68.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TGTG

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/4629 Rpt: 149/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHE, KENNETH <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) FILM PRODUCER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHFAQ, MOHAMMAD <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HEALTH TEXAS
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLEY, AUTUMN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLEY, JOSIE <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85251	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLEY, NANCY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) GOTHAM VET CENTER

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/4629 Rpt: 150/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLEY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code NORTH BEND, OR 97459	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLEY HARDEN, ASHLEY HARDEN <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23225	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DEAL MANAGER		Employer (See Instructions) MICROSOFT
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHWORTH, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHWORTH, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASIM, MUHAMMAD <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/4629 Rpt: 151/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASSAR, NOOR	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASTILL, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASTLE, CYNTHIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75227		
Principal occupation / Job title (See Instructions) SPIRITUAL DIRECTOR		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASTLE, CYNTHIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75227		
Principal occupation / Job title (See Instructions) SPIRITUAL DIRECTOR		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASTLE, CYNTHIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75227		
Principal occupation / Job title (See Instructions) SPIRITUAL DIRECTOR		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/4629 Rpt: 152/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATCHISON, LYNN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731-1116	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CORPORATE DIRECTOR		9 Employer (See Instructions) VARIOUS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATIEE, MARTHA <hr/> Contributor address; City; State; Zip Code FORT DAVIS, TX 79734-0456	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINS, JAMES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINS, JAMES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINS, WANDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) FCC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/4629 Rpt: 153/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINSON, NATHAN	7 Amount of Contribution (\$) \$24.00
	6 Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) PALO ALTO MEDICAL FOUNDATION
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINSON, RAY	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code LEANDER, TX 78641	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINSON, STEVE	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code DALLAS, TX 75252-5104	
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF - 1099 INCOME FROM EBBY HALLIDAY, INC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKINSON-ADAMS, DONALD	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code SAN LEANDRO, CA 94577	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATKISS, KATHERINE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77009	
Principal occupation / Job title (See Instructions) NON PROFIT CONTRACTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/4629 Rpt: 154/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATLAS, SCOTT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LEGAL CONSULTANT		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ATLAS, SCOTT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LEGAL CONSULTANT		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUBIN, KATHERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUBRECHT, THOMAS <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUBRECHT, THOMAS <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/4629 Rpt: 155/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUBRECHT, THOMAS <hr/> 6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55105	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUDESIRK, TERESA <hr/> Contributor address; City; State; Zip Code STEAMBOAT SPRINGS, CO 80477	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUERSWALD, COLETTE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$1,024.00
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) UC BERKELEY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUGUSTINE, JIM <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AULAKH, KULWANT <hr/> Contributor address; City; State; Zip Code FAIRFIELD, CA 94534-4029	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/4629 Rpt: 156/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUPING, ALICIA <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSANKA, JOEL <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-2714	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT PROFESSIONAL		Employer (See Instructions) STATE OF TEXAS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUST, CATHERINE <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, GA 30214	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN, AMANDA <hr/> Contributor address; City; State; Zip Code WELLESLEY, MA 02482	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROPES & GRAY LLP
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN, DAVID <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TESTING CLERK		Employer (See Instructions) EPCC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/4629 Rpt: 157/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN, DAVID <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TESTING CLERK		9 Employer (See Instructions) EPCC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN, MARGARET <hr/> Contributor address; City; State; Zip Code BRICK, NJ 08723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$42.13
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUSTIN TOLLIVER, F L <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) KELSEY SEYBOLD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/4629 Rpt: 158/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUZENNE, GARRETT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77049	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) FOUNDER		9 Employer (See Instructions) GARRETT AUZENNE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUZENNE, LAURA <hr/> Contributor address; City; State; Zip Code LAS CRUCES, NM 88005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUZENNE, MURVIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) STRAKE JESUIT COLLEGE PREPATATORY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVANT, GAYLE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVANT, GAYLE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/4629 Rpt: 159/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVELAR, SEAN <hr/> 6 Contributor address; City; State; Zip Code JOHNSTON, RI 02919	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SERVICE DELIVERY MANAGER		9 Employer (See Instructions) HEALTHEQUITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVENARIUS, ROSEMARY <hr/> Contributor address; City; State; Zip Code BEAR, DE 19701	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVENT PHD, PEGGY J <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERETT, NANCY <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) JOURNALIST		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERETT, NANCY <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) JOURNALIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/4629 Rpt: 160/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, CLIFF <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, JAMES <hr/> Contributor address; City; State; Zip Code KBENHAVN N, DC 20000	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) UNIVERSITY OF COPENHAGEN
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/4629 Rpt: 161/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVERY, RITAMARIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/4629 Rpt: 162/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVEY, MELINDA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVEY, MELINDA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVEY, MELINDA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVEY, MELINDA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILA, ROEL <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78541	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/4629 Rpt: 163/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILA, ROEL <hr/> 6 Contributor address; City; State; Zip Code EDINBURG, TX 78541	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILA RAMIREZ, SANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILES, ARACELY <hr/> Contributor address; City; State; Zip Code SUN VALLEY, CA 91352	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) CITY OF LA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILES, LANDY <hr/> Contributor address; City; State; Zip Code PORT ST LUCIE, FL 34953	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILES, OSCAR <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) ENOME, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/4629 Rpt: 164/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVNERY, SUSIE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75248		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AWADA, AIDA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) LANGUAGE ANALYST		Employer (See Instructions) DOJ
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AXELROD, JEFFREY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LINCOLN, MA 01773		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYALA, ANGELA	Amount of Contribution (\$) \$10.70
Contributor address; City; State; Zip Code LA PUENTE, CA 91746-2111		
Principal occupation / Job title (See Instructions) PROGRAM ANALYST		Employer (See Instructions) GOVERNMENT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYALA, DALIA	Amount of Contribution (\$) \$29.00
Contributor address; City; State; Zip Code CEDAR HILL, TX 75104		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/4629 Rpt: 165/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYALA, DANIEL <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HAYS CISD
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYALA, DANIEL <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HAYS CISD
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYALA, MIRYEA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CHIEF COMPLIANCE OFFICER		Employer (See Instructions) HARRIS COUNTY
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYALA, MIRYEA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CHIEF COMPLIANCE OFFICER		Employer (See Instructions) HARRIS COUNTY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYCOCK, CHRISTINE <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40299	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/4629 Rpt: 166/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYEE, NORMA <hr/> 6 Contributor address; City; State; Zip Code LAKE WORTH, FL 33460	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYEE, NORMA <hr/> Contributor address; City; State; Zip Code LAKE WORTH, FL 33460	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYEE, NORMA <hr/> Contributor address; City; State; Zip Code LAKE WORTH, FL 33460	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYEE, NORMA <hr/> Contributor address; City; State; Zip Code LAKE WORTH, FL 33460	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYERS, SUSAN <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/4629 Rpt: 167/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYERS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code TOMBALL, TX 77377	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYERS, SUSAN <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYERS, WILLIAM <hr/> Contributor address; City; State; Zip Code CARTERSVILLE, GA 30121	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYOADE, AYODELE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-2717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) METROCARE DALLAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYOGU, MELVIN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30316-2389	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ECONOMIST		Employer (See Instructions) EMORY UNIVERSITY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/4629 Rpt: 168/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYOUB, KHALIL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76103	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NA
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AYRES, NANCY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZAD, DAVID <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZADPOUR, ARAM <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76099	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEST SOFTWARE		Employer (See Instructions) SMS INFOCOMM CORP.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZADPOUR, ARAM <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76099	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEST SOFTWARE		Employer (See Instructions) SMS INFOCOMM CORP.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/4629 Rpt: 169/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZEEZ, FATAI <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76014-2867	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) DRIVER		9 Employer (See Instructions) GULFWINDS INTERNATIONAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZEN, COLLEEN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZEN, COLLEEN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZEN, COLLEEN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZIZ, MUHAMMAD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ABRAHAM, WATKINS, NICHOLS, AGOSTO, AZIZ &

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/4629 Rpt: 170/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AZIZ, MUHAMMAD	7 Amount of Contribution (\$) \$10,000.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77002		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ABRAHAM, WATKINS, NICHOLS, AGOSTO, AZIZ &
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) B, DON	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code TAMARAC, FL 33321		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) B, KATE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GREENSBORO, NC 27406		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY OF GREENSBORO
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAARDSEN, CAROL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BERKELEY, CA 94710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABB, ANN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OAKLYN, NJ 08107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/4629 Rpt: 171/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABB, ANN <hr/> 6 Contributor address; City; State; Zip Code OAKLYN, NJ 08107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABB, DANIEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) MICROSOFT
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABCOCK, JENNIFER <hr/> Contributor address; City; State; Zip Code JEFFERSON CITY, MO 65109	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) LIVE MUSIC VENUE OWNER		Employer (See Instructions) SELF EMOLOYEED/THE MISSION, LLC
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABENDURE, BETTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BABER, AMANDA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) PUBLIC TECHNICAL IDENTIFIERS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/4629 Rpt: 172/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACH, GABRIEL <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) NLC
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACH, GABRIEL <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) NLC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACH, MARGARITA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACH, MARGARITA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACH, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/4629 Rpt: 173/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACHMAN, MARK <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92127	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) BTL INC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACHMAN, MARK <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92127	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) BTL INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACHMAN, MARTIN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, IN 47122	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACHMANN, STEPHEN <hr/> Contributor address; City; State; Zip Code EVERGREEN, CO 80439	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) EPCO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACKUS, ANDREW <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/4629 Rpt: 174/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACON, LESLIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) NORTON ROSE FULBRIGHT US LLP
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACON, LESLIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NORTON ROSE FULBRIGHT US LLP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACON, ROBERT <hr/> Contributor address; City; State; Zip Code CASTLE PINES, CO 80108	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BADARPURA, SHAKEEL <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) SELF EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BADGETT, FRANCES A <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/4629 Rpt: 175/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, JOEL <hr/> 6 Contributor address; City; State; Zip Code JACKSON, CA 95642	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) R&D		9 Employer (See Instructions) MP ASSOC INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, JOEL <hr/> Contributor address; City; State; Zip Code JACKSON, CA 95642	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, JOEL <hr/> Contributor address; City; State; Zip Code JACKSON, CA 95642	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, JOEL <hr/> Contributor address; City; State; Zip Code JACKSON, CA 95642	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, JOEL <hr/> Contributor address; City; State; Zip Code JACKSON, CA 95642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R&D		Employer (See Instructions) MP ASSOC INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/4629 Rpt: 176/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, RALPH <hr/> 6 Contributor address; City; State; Zip Code DAVENPORT, IA 52807	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLE, RALPH <hr/> Contributor address; City; State; Zip Code DAVENPORT, IA 52807	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAECHLER, PHIL <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020-3235	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAER, BETTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAER, DONALD <hr/> Contributor address; City; State; Zip Code RICHLAND, WA 99354	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/4629 Rpt: 177/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAETHGE, EDWINA <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAETHGE, EDWINA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAETHGE, EDWINA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAETHGE, EDWINA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, DAVID <hr/> Contributor address; City; State; Zip Code AURORA, CO 80016-7505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/4629 Rpt: 178/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, DAVID <hr/> 6 Contributor address; City; State; Zip Code AURORA, CO 80016-7505	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) RMIM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, DAVID <hr/> Contributor address; City; State; Zip Code AURORA, CO 80016-7505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, DAVID <hr/> Contributor address; City; State; Zip Code AURORA, CO 80016-7505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, DAVID <hr/> Contributor address; City; State; Zip Code AURORA, CO 80016-7505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZ, DAVID <hr/> Contributor address; City; State; Zip Code AURORA, CO 80016-7505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) RMIM

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/4629 Rpt: 179/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZA, AIDA <hr/> 6 Contributor address; City; State; Zip Code CANUTILLO, TX 79835	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED MUNICIPAL JUDGE		9 Employer (See Instructions) TOWN OF ANTHONY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAEZA, MELISSA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79911	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) COUNTY OF EL PASO
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAGGETT, ANTRECE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAGGETT, LARRY <hr/> Contributor address; City; State; Zip Code HOCKLEY, TX 77447	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RECEIVING MANAGER		Employer (See Instructions) SOLIDWOOD FOREST
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAGGS, BO <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSTR MGMT CONSULTANT		Employer (See Instructions) CHENIERE ENERGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/4629 Rpt: 180/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAGGS, BO <hr/> 6 Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CONSTR MGMT CONSULTANT		9 Employer (See Instructions) CHENIERE ENERGY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAGNI, MARTHA <hr/> Contributor address; City; State; Zip Code ELIOT, ME 03903	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAHA, IHSAN <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) CITY OF HOUSTON HEALTH DEPT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAHR, JOANNE <hr/> Contributor address; City; State; Zip Code CHADDS FORD, PA 19317	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAHR, LAUREN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/4629 Rpt: 181/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAHR, LAUREN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10028	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAHRS, ALLAN <hr/> Contributor address; City; State; Zip Code JERSEY CITY, NJ 07305	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAI, BRUCE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) BLUE HILLS REALTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAI, SICHAO <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20854	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAI, SICHAO <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20854	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/4629 Rpt: 182/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIG, MUKARRAM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77068-1453	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) HCC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, ABENAA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-0001	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, ABENAA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-0001	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, DENNIS <hr/> Contributor address; City; State; Zip Code BETHEL, CT 06801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, HEATHER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HEATHER BAILEY

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, LINDA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78730-3355	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, RICHARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735-7450	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, RICHARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735-7450	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SARAH <hr/> Contributor address; City; State; Zip Code NORTH LITTLE ROCK, AR 72118	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		Employer (See Instructions) U OF A LITTLE ROCK
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SARAH <hr/> Contributor address; City; State; Zip Code NORTH LITTLE ROCK, AR 72118	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		Employer (See Instructions) U OF A LITTLE ROCK

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MATERIAL HANDLER		9 Employer (See Instructions) 3M
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, STEPHEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MATERIAL HANDLER		Employer (See Instructions) 3M
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SYLVIA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SYLVIA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SYLVIA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/4629 Rpt: 185/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SYLVIA <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, SYLVIA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, VICTORIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILY, ROBIN <hr/> Contributor address; City; State; Zip Code EASTON, PA 18045	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PET SITTING		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAINTON, CEDRIC <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94116	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIR, KERRY <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98116	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIR, KERRY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIRD, GEORGE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIRD, GEORGE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIRD, TRACEY <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIZA, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEXAS STATE DIRECTOR		9 Employer (See Instructions) NEXTGEN AMERICA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, CORNELIUS <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ASST RESEARCH PROFESSOR		Employer (See Instructions) EMORY UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, CURTIS <hr/> Contributor address; City; State; Zip Code OCEAN CITY, NJ 08226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) ATTORNEY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALAMO COLLEGES DISTRICT
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) AKEANA

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/4629 Rpt: 188/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, DONALD <hr/> 6 Contributor address; City; State; Zip Code POUND, VA 24279-0564	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, JENNY <hr/> Contributor address; City; State; Zip Code MT VERNON, WA 98274	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) PM		Employer (See Instructions) STATE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, JOYCE & BILL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, LYNDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MADELEINE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MADELEINE <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77554	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, PHYLLIS <hr/> Contributor address; City; State; Zip Code LAUREL, MD 20724	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/4629 Rpt: 190/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, PHYLLIS <hr/> 6 Contributor address; City; State; Zip Code LAUREL, MD 20724	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, PHYLLIS <hr/> Contributor address; City; State; Zip Code LAUREL, MD 20724	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, REBECCA <hr/> Contributor address; City; State; Zip Code SOUTH BEACH, OR 97366	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, REBECCA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, REBECCA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/4629 Rpt: 191/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, SAMUEL <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98144	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ACTUARY		9 Employer (See Instructions) SYMETRA LIFE INSURANCE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, SAMUEL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98144	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) SYMETRA LIFE INSURANCE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, SAMUEL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98144	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) SYMETRA LIFE INSURANCE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, SAMUEL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98144	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) SYMETRA LIFE INSURANCE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, SHAWN <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209-1366	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) AUDIO PRODUCER		Employer (See Instructions) SHAWN BAKER

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/4629 Rpt: 192/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, SUSAN P. <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77552	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, WILBER <hr/> Contributor address; City; State; Zip Code SPRING CITY, PA 19475	Amount of Contribution (\$) \$17.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, WILBER <hr/> Contributor address; City; State; Zip Code SPRING CITY, PA 19475	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKKEN, AMY <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/4629 Rpt: 193/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKKEN, AMY <hr/> 6 Contributor address; City; State; Zip Code HUMBLE, TX 77346	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKKEN, AMY <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKSHI, AMARJIT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALASH, JOHN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) VERITY WINE PARTNERS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALASUBRAMANIAN, RAMA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/4629 Rpt: 194/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALCOMBE, APRIL	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78737		
8 Principal occupation / Job title (See Instructions) COURT REPORTER		9 Employer (See Instructions) ECHO CONNECTION
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALCOMBE, APRIL	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) ECHO CONNECTION
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALCOMBE, APRIL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) COURT REOOETER		Employer (See Instructions) ECHO CONNECTION
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALCOMBE, APRIL	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) ECHO CONNECTION
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALCOMBE, APRIL	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) ECHO CONNECTION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/4629 Rpt: 195/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALCOMBE, APRIL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) COURT REOOETER		9 Employer (See Instructions) ECHO CONNECTION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDACCI, MICHELLE <hr/> Contributor address; City; State; Zip Code VIENNA, VA 22181	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) COLUMBUS ROSE, LTD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, DEBRA <hr/> Contributor address; City; State; Zip Code IRVING, TX 75061	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF DALLAS
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, GARY <hr/> Contributor address; City; State; Zip Code WINTER PARK, FL 32792	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, SHANNON <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/4629 Rpt: 196/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, SHANNON <hr/> 6 Contributor address; City; State; Zip Code HUMBLE, TX 77396	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) HARRIS COUNTY
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, SHANNON <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, DENISE <hr/> Contributor address; City; State; Zip Code LEES SUMMIT, MO 64063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PHOENIX HOME HEALTH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, DENISE <hr/> Contributor address; City; State; Zip Code LEES SUMMIT, MO 64063	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PHOENIX HOME HEALTH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, DENISE <hr/> Contributor address; City; State; Zip Code LEES SUMMIT, MO 64063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PHOENIX HOME HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/4629 Rpt: 197/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, DENISE <hr/> 6 Contributor address; City; State; Zip Code LEES SUMMIT, MO 64063	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) PHOENIX HOME HEALTH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, DENISE <hr/> Contributor address; City; State; Zip Code LEES SUMMIT, MO 64063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PHOENIX HOME HEALTH
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALES, DENISE <hr/> Contributor address; City; State; Zip Code LEES SUMMIT, MO 64063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PHOENIX HOME HEALTH
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALFOUR, PATSY <hr/> Contributor address; City; State; Zip Code NEW WINDSOR, NY 12553	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMINISTRATIOM		Employer (See Instructions) CITY EMPLOYEE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, ALFRED <hr/> Contributor address; City; State; Zip Code SOMERSET, NJ 08873	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/4629 Rpt: 198/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, BRENDA <hr/> 6 Contributor address; City; State; Zip Code OAK PARK, IL 60304	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, BRENDA <hr/> Contributor address; City; State; Zip Code OAK PARK, IL 60304	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, JANET <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$61.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, JEAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, JEAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75227	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/4629 Rpt: 199/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, JOSEPH W <hr/> 6 Contributor address; City; State; Zip Code DESCANSO, CA 91916	7 Amount of Contribution (\$) \$100.25
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, NATALIE <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, NATALIE <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, NATALIE <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, SABRINA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/4629 Rpt: 200/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, SABRINA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALL, SABRINA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLANTINE, ALISTAIR <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SPOTIFY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLANTINE, ALISTAIR <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SPOTIFY
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLARD, BROOKS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) REAL ESTATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/4629 Rpt: 201/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLARD, GARRETT <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		9 Employer (See Instructions) DASHIELL
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLARD, KEN <hr/> Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) PEPSICO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLARD, KEN <hr/> Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) PEPSICO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLENTINE, JOHN <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96822	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLENTINE, JOHN <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96822	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/4629 Rpt: 202/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLENTINE, JOHN <hr/> 6 Contributor address; City; State; Zip Code HONOLULU, HI 96822	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLENTINE, JOHN <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96822	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLESTEROS, MAXIMINO <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLMANN, ELISABETH <hr/> Contributor address; City; State; Zip Code CAVE CREEK, AZ 85331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) DESERT MOON RISING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALLOON-MAZARA, MARSHA C. <hr/> Contributor address; City; State; Zip Code SEVERN, MD 21144	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/4629 Rpt: 203/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALMOS, DAVID <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77429-5547	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) WSB LLC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALMOS, DAVID <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429-5547	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) WSB LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALTHAZAR, ANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALTHAZAR, VERGIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PUBLIC SERVANT		Employer (See Instructions) HARRIS COUNTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANDARANAIKE, BHAGYA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) QMS MANAGER		Employer (See Instructions) LONZA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/4629 Rpt: 204/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANISTER, GAURDIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTING		9 Employer (See Instructions) DIFFERENT POINTS OF VIEW
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANISTER, SIMIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANISTER, SIMIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANK, LEWIS <hr/> Contributor address; City; State; Zip Code BEND, OR 97703	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) SCIENTIST, FORENSIC PSYCHOLOGIST		Employer (See Instructions) PRIVATE PRACTICE--SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKES, CHAD <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/4629 Rpt: 205/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, GUM SONG GEORGE <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76708	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, HANNAH <hr/> Contributor address; City; State; Zip Code NEWTON, MA 02459	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, HANNAH <hr/> Contributor address; City; State; Zip Code NEWTON, MA 02459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, TRACEY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIFIED WOMEN'S HEALTH
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, TRACEY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIFIED WOMEN'S HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/4629 Rpt: 206/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, TRACEY <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UNIFIED WOMEN'S HEALTH
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKS, WALLACE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANKSTON, THOMAS <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANN, HAROLD <hr/> Contributor address; City; State; Zip Code CHETEK, WI 54728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANNING, BRADLEY <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64152	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/4629 Rpt: 207/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANNISTER, CASEY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75067		
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) WORLDVENTURES
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANNISTER, KAYLA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165		
Principal occupation / Job title (See Instructions) LEAD		Employer (See Instructions) HEB
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTIST, JEREMY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code OVERLAND PARK, KS 66207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTIST, JEREMY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code OVERLAND PARK, KS 66207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTIST, JEREMY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code OVERLAND PARK, KS 66207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/4629 Rpt: 208/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTIST, JEREMY <hr/> 6 Contributor address; City; State; Zip Code OVERLAND PARK, KS 66207	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTIST, JEREMY <hr/> Contributor address; City; State; Zip Code OVERLAND PARK, KS 66207	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTIST, JEREMY <hr/> Contributor address; City; State; Zip Code OVERLAND PARK, KS 66207	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAPTISTE, PATRICIA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94124	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAQAI, IMRAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BROADCOM LTD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/4629 Rpt: 209/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARAHONA, GABRIELA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DEVELOPMENT		9 Employer (See Instructions) LINK HOUSTON
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARAKAT, SABRINA <hr/> Contributor address; City; State; Zip Code TORRANCE, CA 90503	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARANOFF, EUGENIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBA, BRIANNA <hr/> Contributor address; City; State; Zip Code WHITTIER, CA 90601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBARA W REIFF, MRS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 207/4629 Rpt: 210/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBEITO, CAROL <hr/> 6 Contributor address; City; State; Zip Code FT COLLINS, CO 80528	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) EARTH PROTECT
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBER, DAVID <hr/> Contributor address; City; State; Zip Code NORTH CHILI, NY 14514	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBER, GREG <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBER, MARIAN J <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBERENA, MIRIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DATA GOVERNANCE ANALYST		Employer (See Instructions) EMERSON T&M

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 208/4629 Rpt: 211/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBIERI, RENEE <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90041	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BOOKKEEPING		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBIERI, RENEE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90041	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BOOKKEEPING		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARBINI, CHARLOTTE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARCELO, SUSAN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARCENAS, C <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 209/4629 Rpt: 212/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARCLAY, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) BARCLAY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARFUSS, MELANIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, EDWARD <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80911	Amount of Contribution (\$) \$6.66
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, EDWARD <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80911	Amount of Contribution (\$) \$12.34
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, EDWARD <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80911	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 210/4629 Rpt: 213/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, JAMES <hr/> 6 Contributor address; City; State; Zip Code BETHESDA, MD 20817	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, MARTHA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, MARY <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DENTAL CONSULTANT		Employer (See Instructions) CONTRACT
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, SHELLEY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, SHELLEY <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ECTOR COUNTY ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 211/4629 Rpt: 214/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79761	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ECTOR COUNTY ISD
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, STEPHANIE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) RUSHMORE LOAN MGT SERVICES
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, STEPHANIE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) RUSHMORE LOAN MGT SERVICES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, TERRY <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARLOW, VICTORIA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-8614	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 212/4629 Rpt: 215/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNARD, TONYA <hr/> 6 Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) SPLUNK
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNAVE, SERGE <hr/> Contributor address; City; State; Zip Code BAYSIDE QUEENS, NY 11360-1414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNER, JUANITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77031	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNER, JUANITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77031	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, BEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78708	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 213/4629 Rpt: 216/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, GAIL	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code COLUMBIA, SC 29204-7723		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF SOUTH CAROLINA
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76185-0836		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76185-0836		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, LANITA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BAKERSFIELD, CA 93314		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, MARION	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code MAPLEWOOD, NJ 07040-2617		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 214/4629 Rpt: 217/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, MARION	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code MAPLEWOOD, NJ 07040-2617		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, MARION	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code MAPLEWOOD, NJ 07040-2617		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, MARION	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MAPLEWOOD, NJ 07040-2617		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, SHELLY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code SAGINAW, TX 76179		
Principal occupation / Job title (See Instructions) FAIR HOUSING INVESTIGATOR		Employer (See Instructions) HUD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NEWPORT, RI 02840		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 215/4629 Rpt: 218/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, CINDY	7 Amount of Contribution (\$) \$120.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, CINDY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78731-1127	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, GAIL	Amount of Contribution (\$) \$42.13
	Contributor address; City; State; Zip Code TOMBALL, TX 77375	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, GAIL	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code TOMBALL, TX 77375	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, KATHLEEN	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code LOUISVILLE, KY 40229	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 216/4629 Rpt: 219/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, KIMBERLY	7 Amount of Contribution (\$) \$34.00
6 Contributor address; City; State; Zip Code WINONA, TX 75792		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETTE, BRENDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ACTON, CA 93510		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETTE, BRENDA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code ACTON, CA 93510		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETTE, BRENDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ACTON, CA 93510		
Principal occupation / Job title (See Instructions) RETIRED GENERAL MANAGER		Employer (See Instructions) CITY OF LOS ANGELES
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETTE, BRENDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ACTON, CA 93510		
Principal occupation / Job title (See Instructions) RETIRED GENERAL MANAGER		Employer (See Instructions) CITY OF LOS ANGELES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 217/4629 Rpt: 220/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETTE, BRENDA <hr/> 6 Contributor address; City; State; Zip Code ACTON, CA 93510	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) RETIRED GENERAL MANAGER		9 Employer (See Instructions) CITY OF LOS ANGELES
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, VICKI <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, VICKI <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, VICKI <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, VICKI <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 218/4629 Rpt: 221/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHART, VICKI	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GALVESTON, TX 77551		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNHILL, SHARON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DENTON, TX 76209-4837		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNISKIS, MARY SUE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOPKINS, MN 55305		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNUM, SUE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNUM, SUE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 219/4629 Rpt: 222/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAROHN, NANCY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARON, ANDRE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LEXINGTON, KY 40415		
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) BRUSHWORKS LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARON, ANDRE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LEXINGTON, KY 40415		
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) BRUSHWORKS LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARON, LISA BLUE	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARON, LISA BLUE	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 220/4629 Rpt: 223/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARON, VITALY <hr/> 6 Contributor address; City; State; Zip Code ESMONT, VA 22937	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARONE, ALAN <hr/> Contributor address; City; State; Zip Code CEDARVILLE, OH 45314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARONE, ALAN <hr/> Contributor address; City; State; Zip Code CEDARVILLE, OH 45314	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARONE, ALAN <hr/> Contributor address; City; State; Zip Code CEDARVILLE, OH 45314	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, LINDA <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/4629 Rpt: 224/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, LINDA <hr/> 6 Contributor address; City; State; Zip Code MANCHACA, TX 78652	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, LINDA <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, LINDA <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, SUZANNE <hr/> Contributor address; City; State; Zip Code TAKOMA PARK, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FANNIE MAE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, VANESSA <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) DELL CHILDRENS MEDICAL CENTER

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 222/4629 Rpt: 225/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARR, VANESSA <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) DELL CHILDRENS MEDICAL CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRACK, LISA <hr/> Contributor address; City; State; Zip Code CLEARWATER, FL 33763	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IMPLEMENTATION SPECIALIST		Employer (See Instructions) EYE CARE LEADERS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRACK, LISA <hr/> Contributor address; City; State; Zip Code CLEARWATER, FL 33763	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IMPLEMENTATION SPECIALIST		Employer (See Instructions) EYE CARE LEADERS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRAN, BRIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) BLUWARE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRAN, BRIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) BLUWARE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/4629 Rpt: 226/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRAN, BRIAN <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) BLUWARE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRAN, BRIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) BLUWARE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRAN, BRIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) BLUWARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRERA, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRERA, RICK <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87123	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BUCKINGHAM BARRERA LAW FIRM

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/4629 Rpt: 227/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRERA, STEVE <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, BARBARA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79493	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, FRANCIS <hr/> Contributor address; City; State; Zip Code HUMMELSTOWN, PA 17036	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, JO-ANN <hr/> Contributor address; City; State; Zip Code REDMOND, OR 97756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, TAMSEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NORTON ROSE FULBRIGHT

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/4629 Rpt: 228/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, TAMSEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) NORTON ROSE FULBRIGHT
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, TRAVIS <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CULINARY TEACHER		Employer (See Instructions) ONION CREEK KITCHENS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, TRAVIS <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CULINARY TEACHER		Employer (See Instructions) ONION CREEK KITCHENS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT, WRENDA <hr/> Contributor address; City; State; Zip Code BELLVILLE, TX 77418	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT PHD, MINNA S <hr/> Contributor address; City; State; Zip Code STRATFORD, CT 06614	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/4629 Rpt: 229/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRETT PHD, MINNA S <hr/> 6 Contributor address; City; State; Zip Code STRATFORD, CT 06614	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRIENTOS, TINA <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) VERTICAL
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRIENTOS, TINA <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) VERTICAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRINGTON, DOTT. M <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRIOS, DAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RICHARDSON ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/4629 Rpt: 230/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRIOS, DAN <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) RISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRITEAU, SHEENA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78242	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MILITARY		Employer (See Instructions) US ARMY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRON, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRON, ELIZABETH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSTRUCTIONAL AIDE		Employer (See Instructions) YISD
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRON, ELIZABETH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSTRUCTIONAL AIDE		Employer (See Instructions) YISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/4629 Rpt: 231/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRON, NICHOLAS	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARROW, GEORGE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TEI PLANNING + DESIGN
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARROW, MICHAEL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARROW, MICHAEL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARROW, MICHAEL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/4629 Rpt: 232/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRY, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HEALTH SCIENCE SPECIALIST		9 Employer (See Instructions) VHA
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRY, CATHERINE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HEALTH SCIENCE SPECIALIST		Employer (See Instructions) VHA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRY, CHRIS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77014	Amount of Contribution (\$) \$3.33
Principal occupation / Job title (See Instructions) OPERATOR		Employer (See Instructions) DISNEY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARSHOP, NOAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT COORDINATOR		Employer (See Instructions) VIVAPOLITICS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARSHOP, NOAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT COORDINATOR		Employer (See Instructions) VIVAPOLITICS

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARSHOP, ROSEMARY <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTEK, WILLIAM <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTER, MARY <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTH, ILENE <hr/> Contributor address; City; State; Zip Code TELLURIDE, CO 81435	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTH, ILENE <hr/> Contributor address; City; State; Zip Code TELLURIDE, CO 81435	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/4629 Rpt: 234/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTH, ILENE	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code TELLURIDE, CO 81435		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTLE, ALISSA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SANTA MONICA, CA 90405		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTLEY, PAULINE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code VANCOUVER, WA 97683		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTO, ANDREW	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SOMERVILLE, MA 02143		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, CAROL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/4629 Rpt: 235/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, CHRIS	7 Amount of Contribution (\$) \$5.04
6 Contributor address; City; State; Zip Code AUSTIN, TX 78757		
8 Principal occupation / Job title (See Instructions) AUTHOR		9 Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, CHRIS	Amount of Contribution (\$) \$5.03
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, CHRIS	Amount of Contribution (\$) \$5.04
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, CHRIS	Amount of Contribution (\$) \$5.03
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, JOHN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) HNTB CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/4629 Rpt: 236/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, ZACHARY	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code BUDA, TX 78610		
8 Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		9 Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, ZACHARY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTOS, JANET P	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LITTLE ROCK, AR 72223-4297		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTOS, JANET P	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LITTLE ROCK, AR 72223-4297		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTOS, JANET P	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LITTLE ROCK, AR 72223-4297		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/4629 Rpt: 237/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTOS, JANET P	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code LITTLE ROCK, AR 72223		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTOS, JOHN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code HOUSTON, TX 77018		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTSCH, KENDRA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AISD
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTTER, BETH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GAHANNA, OH 43230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASALDUA, HOMERO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EDINBURG, TX 78541		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/4629 Rpt: 238/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASALDUA, HOMERO <hr/> 6 Contributor address; City; State; Zip Code EDINBURG, TX 78541	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASARICH, JOYCE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASARICH, JOYCE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASARICH, JOYCE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASEY, KEVIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DHISCO

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/4629 Rpt: 239/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASHARA, LINDA KAY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASHARA, LINDA KAY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASKIN, BONNIE <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, CHASITY <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75089	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EC COORDINATOR		Employer (See Instructions) GARLAND ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, JERRY <hr/> Contributor address; City; State; Zip Code SURFSIDE BEACH, TX 77541	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 237/4629 Rpt: 240/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, JERRY <hr/> 6 Contributor address; City; State; Zip Code SURFSIDE BEACH, TX 77541	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, JUDI <hr/> Contributor address; City; State; Zip Code SURFSIDE BEACH, TX 77541	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, PAMELA <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, REBECCA <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PILATES INSTRUCTOR		Employer (See Instructions) CLUB PILATES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, ROBIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 238/4629 Rpt: 241/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASSEN, DAISY <hr/> 6 Contributor address; City; State; Zip Code EAST GREENWICH, RI 02818-2222	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHILD PSYCHIATRIST		9 Employer (See Instructions) THRIVE BEHAVIORAL HEALTH
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASTON, VALERIE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASTON LAW PC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASTON, VALERIE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASTON LAW PC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASTON-SUTTON, VALERIE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASTON LAW PC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASTON-SUTTON, VALERIE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASTON LAW PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/4629 Rpt: 242/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASTONI, AMY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATCHELDER, NED <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02445	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ANTHROPIC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		Employer (See Instructions) JEFFERSON COUNTY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		Employer (See Instructions) JEFFERSON COUNTY
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		Employer (See Instructions) JEFFERSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 240/4629 Rpt: 243/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, KARREN <hr/> 6 Contributor address; City; State; Zip Code ROANOKE, TX 76262	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, KATHERINE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, KEVIN <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, KIM <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, KIM <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 241/4629 Rpt: 244/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, MARGARET <hr/> 6 Contributor address; City; State; Zip Code VANCOUVER, WA 98663	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, RALPH <hr/> Contributor address; City; State; Zip Code HUNTLY, VA 22640	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, RALPH <hr/> Contributor address; City; State; Zip Code HUNTLY, VA 22640	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, SALLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATES, SHERRYL <hr/> Contributor address; City; State; Zip Code DETROIT, MI 48205	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CRCA		Employer (See Instructions) TRILOGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 242/4629 Rpt: 245/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATOT, LAURYN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) BC LAW GROUP, PC
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATRES, CARLOS	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85260		
Principal occupation / Job title (See Instructions) FIELD ORGANIZER		Employer (See Instructions) EPDP
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATSCHELET, MARGARET	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARVADA, CO 80005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATSON, VICKI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SETON MEDICAL CENTER WILLIAMSON
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATSON, VICKI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SETON MEDICAL CENTER WILLIAMSON

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 243/4629 Rpt: 246/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATSON, VICKI <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REGISTERED NURSE		9 Employer (See Instructions) SETON MEDICAL CENTER WILLIAMSON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATTENHOUSE, ANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATTERTON, JEAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUDGET PROCESSOR		Employer (See Instructions) CODY POOLS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATTEY, SARAH <hr/> Contributor address; City; State; Zip Code WATKINSVILLE, GA 30677	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATTEY, SARAH <hr/> Contributor address; City; State; Zip Code WATKINSVILLE, GA 30677	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 244/4629 Rpt: 247/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATTLE, CLAIRE <hr/> 6 Contributor address; City; State; Zip Code OAK PARK, IL 60304	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) CNH INDUSTRIAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, JENNIFER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) CAVULUS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, MARILYN <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, IA 50046	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUERMEISTER, MICHAEL <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 245/4629 Rpt: 248/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUERMEISTER, MICHAEL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code LEANDER, TX 78645		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUGH, ALISSA LEVEY	Amount of Contribution (\$) \$13.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUGUS, JUSTIN	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code PHOENIX, AZ 85037		
Principal occupation / Job title (See Instructions) AUDIO, VIDEO, LIGHTS PRODUCTION		Employer (See Instructions) CHRIST'S CHURCH OF THE VALLEY
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUGUS, JUSTIN	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code PHOENIX, AZ 85037		
Principal occupation / Job title (See Instructions) AUDIO, VIDEO, LIGHTS PRODUCTION		Employer (See Instructions) CHRIST'S CHURCH OF THE VALLEY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUHOFER, VALERIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78705		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 246/4629 Rpt: 249/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUHOFER, VALERIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78705	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUM, CHRISTIAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMANN, CHARLES W <hr/> Contributor address; City; State; Zip Code GENEVA, IL 60134	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMANN, RUDOLPH <hr/> Contributor address; City; State; Zip Code GREENEVILLE, TN 37745	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMGARDNER, FW <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 247/4629 Rpt: 250/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMGARDNER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMGARDNER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMGARDNER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMGARTEN, JONAH <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KIPP TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMGARTEN, KURT <hr/> Contributor address; City; State; Zip Code LINCOLN, NE 68516	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE ASSOCIATE		Employer (See Instructions) WALGREENS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 248/4629 Rpt: 251/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUMSTEIN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code EAST HAMPTON, NY 11937-2426	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUSKE, BRENDA <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TOMBALL ISD
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUTISTA, JENNIFER <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TECH RECRUITER		Employer (See Instructions) CISCO SYSTEMS INC
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUTISTA, JESUS <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUTISTA, RITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) LATINA PODCASTERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 249/4629 Rpt: 252/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAW, ALI <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78630	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) ENGR		9 Employer (See Instructions) AB
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAW, ALI <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78630	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) ENGR		Employer (See Instructions) AB
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAWCOM, CAROLYN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAXT, VIRGINIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAXTER, KATHLEEN <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94618	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TECHNICAL RECRUITER		Employer (See Instructions) BUSINESS WIRE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/4629 Rpt: 253/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYENS, CAROL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYENS, CAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYLESS, DEBRA <hr/> Contributor address; City; State; Zip Code PARSONS, KS 67357	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYLESS, DEBRA <hr/> Contributor address; City; State; Zip Code PARSONS, KS 67357	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYLOR, NOREEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723-5458	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TAX ANALYST		Employer (See Instructions) APPLE INC

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYNE, SARAH <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA, CA 95409	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COMMUNICATIONS		9 Employer (See Instructions) CLARK FOUNDATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYS, SARAH <hr/> Contributor address; City; State; Zip Code LANCASTER, CA 93534-2211	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) GOV EMPLOYEE		Employer (See Instructions) LA COUNTY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZAN, HOMERO <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) COBBFENDLEY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZAN, HOMERO <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZAN, HOMERO <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) COBBFENDLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/4629 Rpt: 255/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZDRESCH, YOLANDA	7 Amount of Contribution (\$) \$21.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78727		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAZILE, BS, MBA, TOWANNA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ATASCOCITA, TX 77347		
Principal occupation / Job title (See Instructions) SR. MGR GLOBAL SECURITY & INVESTIGATIONS		Employer (See Instructions) AT&T
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEA, TERRY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BILOXI, MS 39531		
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) VA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEA, TERRY	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BILOXI, MS 39531		
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) VA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEABER, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KENOSHA, WI 53153		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/4629 Rpt: 256/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEACH, PAUL <hr/> 6 Contributor address; City; State; Zip Code FALLBROOK, CA 92028	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) TECHNICAL SPECIALIST		9 Employer (See Instructions) LEGOLAND CALIFORNIA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEACH, PAUL <hr/> Contributor address; City; State; Zip Code FALLBROOK, CA 92028	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TECHNICAL SPECIALIST		Employer (See Instructions) LEGOLAND CALIFORNIA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAL, LOUISA <hr/> Contributor address; City; State; Zip Code FIRCREST, WA 98466	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAL, LOUISA <hr/> Contributor address; City; State; Zip Code FIRCREST, WA 98466	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAL, STANLEY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OFFICE WORKER		Employer (See Instructions) LIFECYCLE DENTAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/4629 Rpt: 257/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAL, STANLEY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) OFFICE WORKER		9 Employer (See Instructions) LIFECYCLE DENTAL
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAL, STANLEY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OFFICE WORKER		Employer (See Instructions) LIFECYCLE DENTAL
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAM, ALISON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212-1556	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAM, ALISON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212-1556	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, MARIE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DENTAL HYGIENIST		Employer (See Instructions) GENTLE DENTISTRY OF LAS COLINAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/4629 Rpt: 258/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, MARIE <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76040	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DENTAL HYGIENIST		9 Employer (See Instructions) GENTLE DENTISTRY OF LAS COLINAS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, NANCY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ARLINGTON ISD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, NANCY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ARLINGTON ISD
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, NANCY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ARLINGTON ISD
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, NANCY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ARLINGTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/4629 Rpt: 259/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, NANCY <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76006	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) ARLINGTON ISD
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, NANCY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ARLINGTON ISD
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, WARREN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAN, WARREN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARD, ANNE <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33603	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/4629 Rpt: 260/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARD, ANNETTE <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77581	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) SMART START
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARD, MICHELE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-6364	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) LAMAR CISD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARDALL, BILL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EQUAL JUSTICE CENTER
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARDEN, TROY <hr/> Contributor address; City; State; Zip Code TRINITY, TX 75862	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARDSLEY, NICHOLAS <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) GRC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/4629 Rpt: 261/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARDSLEY, NICHOLAS <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		9 Employer (See Instructions) GRC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARDSLEY, NICHOLAS <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) GRC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEASLEY, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEASLEY, JOSH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) AMERIPRISE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/4629 Rpt: 262/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		9 Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/4629 Rpt: 263/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		9 Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATON, DOUGLAS <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) AMERICAN CARGO ASSURANCE, LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATTIE, MARY KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BISHOP DUNNE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/4629 Rpt: 264/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATTY, CAROL <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATTY, CAROL <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEATTY, CAROL <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUCHEMIN, JANINE <hr/> Contributor address; City; State; Zip Code STUART, FL 34994	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUDRY, KATHLEEN <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/4629 Rpt: 265/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUDRY, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code MANVEL, TX 77578	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAULIEU, RACHEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUTYMAN, ALEXANDRA <hr/> Contributor address; City; State; Zip Code NEW HAVEN, CT 06511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMICS CREATOR		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUTYMAN, ALEXANDRA <hr/> Contributor address; City; State; Zip Code NEW HAVEN, CT 06511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMICS CREATOR		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUVAIS, CAROL <hr/> Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) CAROL BEAUVAIS PHD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/4629 Rpt: 266/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUVAIS, CAROL <hr/> 6 Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) CAROL BEAUVAIS PHD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAUVAIS, RAYMOND <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97405	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVER, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FAMILY LAW ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVER, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701-2638	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FAMILY LAW ATTORNEY		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVER, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701-2638	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FAMILY LAW ATTORNEY		Employer (See Instructions) SELF

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVER, BECKY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICE OF BECKY BEAVER
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVER, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF BECKY BEAVER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVERS-BROOKS, BEVERLY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVERS-BROOKS, BEVERLY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEAVERS-BROOKS, BEVERLY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECERRA, JUDGE CHRISTIAN <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77406	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, ANTHONY <hr/> Contributor address; City; State; Zip Code HEWITT, TX 76643	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, DEBORAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, DEBORAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, DEBORAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, DEBORAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, ELIZABETH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, ELIZABETH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, EVA CAROL <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, JOSEPH C <hr/> 6 Contributor address; City; State; Zip Code LAFAYETTE, CA 94549-3133	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, JOYCE L. <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) TCU EXTENDED EDUCATION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, LAUREN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DOG GROOMER/BUSINESS OWNER		Employer (See Instructions) GRACE GROOMING - SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, PAUL <hr/> Contributor address; City; State; Zip Code BETHANY, MO 64424	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) GRACELAND UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, STEVEN <hr/> Contributor address; City; State; Zip Code QUEENS, NY 11415	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/4629 Rpt: 271/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, ALLISON	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75230		
8 Principal occupation / Job title (See Instructions) INSTRUCTOR		9 Employer (See Instructions) DRAMA KIDS INTERNATIONAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, AMANDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code STERLING, VA 20164-5374		
Principal occupation / Job title (See Instructions) BUSINESS OWNER AND DOG TRAINER		Employer (See Instructions) SELF-EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, JEANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BECKER PR
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, LYLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ENUMCLAW, WA 98022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code AUSTIN, TX 78736		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS DFPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 269/4629 Rpt: 272/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKER, NAOMI <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11238	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) DATA MANAGER		9 Employer (See Instructions) NEW YORK IMMIGRATION COALITION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKETT, KAREN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKMAN, PEGGY <hr/> Contributor address; City; State; Zip Code CORAVILLE, IA 52241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECKMAN, RUTHI <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEDFORD, DAVE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75233	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 270/4629 Rpt: 273/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEDFORD, JANE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEDNAR, DEATON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEDROSIAN, ART <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEE, BELINDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DISPATCHER		Employer (See Instructions) WASTE MANAGEMENT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, B TERHUNE <hr/> Contributor address; City; State; Zip Code COVINA, CA 91723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 271/4629 Rpt: 274/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, B TERHUNE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code COVINA, CA 91723		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, HILARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MARFA, TX 79843		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, HILARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MARFA, TX 79843		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, MARY JO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEBE, MARY JO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/4629 Rpt: 275/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEECROFT, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code LEOLA, PA 17540	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEEDE, NORMAN <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92612	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEELER, DAVID L <hr/> Contributor address; City; State; Zip Code FULSHEAR, TX 77441-1130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEER, AVERY <hr/> Contributor address; City; State; Zip Code BLOOMFIELD, NY 14469	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEER, AVERY <hr/> Contributor address; City; State; Zip Code BLOOMFIELD, NY 14469	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 273/4629 Rpt: 276/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEETEM, ROSE <hr/> 6 Contributor address; City; State; Zip Code DENVER, CO 80211	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEGGS, EMILY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INDUSTRY SALES EXECUTIVE		Employer (See Instructions) ORACLE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEGNAUD, JEROME <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEHAR, MARION <hr/> Contributor address; City; State; Zip Code COLUMBUS, GA 31904	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEHAR, MARION <hr/> Contributor address; City; State; Zip Code COLUMBUS, GA 31904	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 274/4629 Rpt: 277/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEHRMAN, JOHN ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006-4332	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEHRMAN, JOHN ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEIERLE, CHARLES <hr/> Contributor address; City; State; Zip Code KINGSLAND, TX 78639	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEIGEL, PAT <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85715	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RN-CLIN DOC SPECIALIST		Employer (See Instructions) AMN HEALTHCARE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELA, CHERYL <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97236	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/4629 Rpt: 278/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELAIRE, JEANNE <hr/> 6 Contributor address; City; State; Zip Code LIVE OAK, TX 78233	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELAIRE, JEANNE <hr/> Contributor address; City; State; Zip Code LIVE OAK, TX 78233	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELANGER, ROBERT <hr/> Contributor address; City; State; Zip Code FISKDALE, MA 01518-1102	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELCHER, XAVIER <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29611	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) INSTRUMENTATION TECH		Employer (See Instructions) AEROTEK
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELDEN, TOM <hr/> Contributor address; City; State; Zip Code CASA GRANDE, AZ 85122	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/4629 Rpt: 279/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELFORD, ANNE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77077	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RABBI		9 Employer (See Instructions) CCAR
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELZAIRE, AMELIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MIDLAND COLLEGE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, BEVERLY <hr/> Contributor address; City; State; Zip Code CLOVIS, CA 93619	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, BRENDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, CAROLINE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/4629 Rpt: 280/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, CAROLINE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, CHRIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PATTON BOGGS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, CHRIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PATTON BOGGS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, ELIZABETH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, IVERSON	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ATLANTA, GA 30331		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 278/4629 Rpt: 281/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, IVERSON <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30331	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, JACLYN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FINANCIAL PLANNER		Employer (See Instructions) HPOPS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, JACLYN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FINANCIAL PLANNER		Employer (See Instructions) HPOPS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, KENNETH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOLDIER		Employer (See Instructions) US ARMY RESERVES
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, KENNETH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOLDIER		Employer (See Instructions) US ARMY RESERVES

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/4629 Rpt: 282/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, KENNETH <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79925	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) SOLDIER		9 Employer (See Instructions) US ARMY RESERVES
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, KENNETH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOLDIER		Employer (See Instructions) US ARMY RESERVES
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, KENNETH <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOLDIER		Employer (See Instructions) US ARMY RESERVES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, LYDIA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, LYDIA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/4629 Rpt: 283/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, MAGDALENE <hr/> 6 Contributor address; City; State; Zip Code THORNTON, CO 80241	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, MARIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HOME HEALTH & BEYOND		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, MARLA <hr/> Contributor address; City; State; Zip Code CARMEL VALLEY, CA 93924	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BODY THERAPIST		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, MATTHEW <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) EATON
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, PAMELA <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87508	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NEUROTHERAPIST		Employer (See Instructions) SELF EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/4629 Rpt: 284/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, PAMELA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) SMU
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SARAH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SARAH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SARAH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SARAH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/4629 Rpt: 285/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SARAH <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, TE'IVA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, TE'IVA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, WARREN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STRATEGIC PROGRAM MANAGER		Employer (See Instructions) HP INC.
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, WARREN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STRATEGIC PROGRAM MANAGER		Employer (See Instructions) HP INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/4629 Rpt: 286/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, WILL <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) LOCKHEED MARTIN
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLAMY, BRAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER/ENGINEER		Employer (See Instructions) SELF-EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLAMY, BRAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER/ENGINEER		Employer (See Instructions) SELF-EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLE, DONNA <hr/> Contributor address; City; State; Zip Code SUPERIOR, CO 80027	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLINI, SONIA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232-3332	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) BELLINI'S INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/4629 Rpt: 287/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLINI, SONIA <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97232-3332	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) BELLINI'S INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLINI, SONIA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232-3332	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) BELLINI'S INC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLINI, SONIA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232-3332	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) BELLINI'S INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLINI, SONIA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232-3332	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) BELLINI'S INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLOMY, GAYLE <hr/> Contributor address; City; State; Zip Code JERSEY VILLAGE, TX 77040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/4629 Rpt: 288/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLONE, MARY <hr/> 6 Contributor address; City; State; Zip Code LACOMBE, TX 75089	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ST TAMMANY PARISH PUBLIC SCHOOLS
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLONE, MARY <hr/> Contributor address; City; State; Zip Code LACOMBE, TX 75089	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ST TAMMANY PARISH PUBLIC SCHOOLS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLOUR, HELENE <hr/> Contributor address; City; State; Zip Code OAK PARK, IL 60302	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELTRAN, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELTRAN, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/4629 Rpt: 289/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELYAYEVA, YEKATERINA <hr/> 6 Contributor address; City; State; Zip Code SILVER SPRING, MD 20910	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEMPKINS, SCOTT <hr/> Contributor address; City; State; Zip Code GROTON, MA 01450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SENIOR MANAGER		Employer (See Instructions) DELL TECHNOLOGIES
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEMPORAD, RAPHAEL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 11231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) BBMG
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENARD, MISCHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES ASSOCIATE		Employer (See Instructions) ROSS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, GLENN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/4629 Rpt: 290/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, MELISSA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) HEB WELLNESS
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, MELISSA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HEB WELLNESS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, MICHAEL <hr/> Contributor address; City; State; Zip Code PENSACOLA, FL 32534	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) PEPSI
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, MICHAEL <hr/> Contributor address; City; State; Zip Code PENSACOLA, FL 32534	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) PEPSI
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, OTTO <hr/> Contributor address; City; State; Zip Code COLLIERVILLE, TN 38017-6153	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/4629 Rpt: 291/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDES, YSELA <hr/> 6 Contributor address; City; State; Zip Code COVINA, CA 91722	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, RICK <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CTO		Employer (See Instructions) LEANSTACK, INC.
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENAVIDEZ, RICK <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CTO		Employer (See Instructions) LEANSTACK, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENCHANNOUF, EL MEHDI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) USAA
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENCOMO, IDA <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ESL PARAPROFESSIONAL		Employer (See Instructions) LIVINGSTONISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/4629 Rpt: 292/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, GLORIA <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76012	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) TRANSSOLUTIONS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, GLORIA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TRANSSOLUTIONS
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, HARRISON <hr/> Contributor address; City; State; Zip Code LONGWOOD, FL 32779	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) EVENTIVE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, LAREL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, LAREL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/4629 Rpt: 293/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, LAREL <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, LAREL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDER, LAREL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDET, LINDA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDET, LINDA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 291/4629 Rpt: 294/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDETTO, HILARIE <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PARAPROFESSIONAL		9 Employer (See Instructions) GCISD-CHHS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDETTO, HILARIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) PARAPROFESSIONAL		Employer (See Instructions) GCISD-CHHS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDETTO, HILARIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PARAPROFESSIONAL		Employer (See Instructions) GCISD-CHHS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDETTO, HILARIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PARAPROFESSIONAL		Employer (See Instructions) GCISD-CHHS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDICT, MICHAEL <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 292/4629 Rpt: 295/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDICT, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code COLUMBUS, OH 43204	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENEDICT, MICHAEL <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENGELSDORF, SETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VIDEOGRAPHER		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENHAM, ALICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENIGNO, RONALD <hr/> Contributor address; City; State; Zip Code BREA, CA 92821	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 293/4629 Rpt: 296/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENING, DONNA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENING, DONNA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENJAMIN, JEAN <hr/> Contributor address; City; State; Zip Code QUEENS, NY 11375	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, DEBBIE <hr/> Contributor address; City; State; Zip Code ELK GROVE, CA 95624	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, DEBBIE <hr/> Contributor address; City; State; Zip Code ELK GROVE, CA 95624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 294/4629 Rpt: 297/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, DEBBIE <hr/> 6 Contributor address; City; State; Zip Code ELK GROVE, CA 95624	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, GAYLE <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) CROW HOLDINGS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, GAYLE <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) CROW HOLDINGS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, KARI <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, KARI <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 295/4629 Rpt: 298/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, KARI <hr/> 6 Contributor address; City; State; Zip Code PALESTINE, TX 75801	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, KARI <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, KATHERINE <hr/> Contributor address; City; State; Zip Code TORRANCE, CA 90502	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) TECH PROJECT MANAGER		Employer (See Instructions) MH SUB I LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, PATRICIA <hr/> Contributor address; City; State; Zip Code COCOA, FL 32927	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) BOEING
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, TAMARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN-CLINICAL EDUCATOR		Employer (See Instructions) NOVASYTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 296/4629 Rpt: 299/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, TIMOTHY	7 Amount of Contribution (\$) \$52.00
6 Contributor address; City; State; Zip Code GRANBURY, TX 76048		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT-KING, MARVIN R	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KILLEEN, TX 76543		
Principal occupation / Job title (See Instructions) INVENTORY COORDINATOR		Employer (See Instructions) H-E-B
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT-KING, MARVIN R	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KILLEEN, TX 76543		
Principal occupation / Job title (See Instructions) INVENTORY COORDINATOR		Employer (See Instructions) H-E-B
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT-KING, MARVIN R	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KILLEEN, TX 76543		
Principal occupation / Job title (See Instructions) INVENTORY COORDINATOR		Employer (See Instructions) H-E-B
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENODIN, ELLEN	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code MONTGOMERY, TX 77316		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 297/4629 Rpt: 300/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENODIN, ELLEN <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSKY, DAN <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199-1129	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, JERRY <hr/> Contributor address; City; State; Zip Code GROVEPORT, OH 43125	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, JERRY <hr/> Contributor address; City; State; Zip Code GROVEPORT, OH 43125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, JERRY <hr/> Contributor address; City; State; Zip Code GROVEPORT, OH 43125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 298/4629 Rpt: 301/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, PAUL <hr/> 6 Contributor address; City; State; Zip Code MURCHISON, TX 75778	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, PAUL <hr/> Contributor address; City; State; Zip Code MURCHISON, TX 75778	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENSON, PAUL <hr/> Contributor address; City; State; Zip Code MURCHISON, TX 75778	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENTCH, SUE <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENTLEY, MATTHEW <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GOVERNMENT RELATIONS CONSULTANT		Employer (See Instructions) BENTLEY PUBLIC AFFAIRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 299/4629 Rpt: 302/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENZ, SUSAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78702	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENZ, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERANEK, LINDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERASLEY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONTINUITY PLANNER		Employer (See Instructions) TEXAS MEDICAL BOARD
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERASLEY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONTINUITY PLANNER		Employer (See Instructions) TEXAS MEDICAL BOARD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 300/4629 Rpt: 303/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERCEGEAY, DIANE <hr/> 6 Contributor address; City; State; Zip Code MARIETTA, GA 30064	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERCEGEAY, DIANE <hr/> Contributor address; City; State; Zip Code MARIETTA, GA 30064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEREK, KATHY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE (ENGINEER)		Employer (See Instructions) KCI TECHNOLOGIES, INC.
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEREK, KATHY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE (ENGINEER)		Employer (See Instructions) KCI TECHNOLOGIES, INC.
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEREL-HARROP, SARAH <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) INTERN MINISTER		Employer (See Instructions) TXUUJM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 301/4629 Rpt: 304/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, BRUCE <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 85743	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DISTRICT COURT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DISTRICT COURT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DISTRICT COURT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007-5120	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 302/4629 Rpt: 305/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, TOM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007-5120	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERG, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007-5120	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGEN, JULIA <hr/> Contributor address; City; State; Zip Code MARYSVILLE, PA 17053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGER, JONATHAN <hr/> Contributor address; City; State; Zip Code SEBASTOPOL, CA 95472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SONOMA COUNTY SUPERIOR COURT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGH, KENDALL <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15236	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 303/4629 Rpt: 306/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGH, KENDALL <hr/> 6 Contributor address; City; State; Zip Code PITTSBURGH, PA 15236	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 304/4629 Rpt: 307/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		9 Employer (See Instructions) FAMILY LITERACY NETWORK
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 305/4629 Rpt: 308/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		9 Employer (See Instructions) FAMILY LITERACY NETWORK
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, ELDO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED FROM RUNNING NON-PROFIT THAT TEACHES		Employer (See Instructions) FAMILY LITERACY NETWORK
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGMAN, HOWARD	Amount of Contribution (\$) \$100.25
Contributor address; City; State; Zip Code ASHEVILLE, NC 28803		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGSTEIN, SCOTT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 91601		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 306/4629 Rpt: 309/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGSTROM, SUSAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78756		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGUS, JILL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75252		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKA, ANGELA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77059		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKA, ANGELA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77059		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKENKAMP, MARIE	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 307/4629 Rpt: 310/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKENKAMP, MARIE <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKLEY, HOWARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKLEY, HOWARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKLEY, NANCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKLEY, NANCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 308/4629 Rpt: 311/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERKLEY, NANCY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75235	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLEY, TANYA <hr/> Contributor address; City; State; Zip Code NORTH AURORA, IL 60542	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLEY, TANYA <hr/> Contributor address; City; State; Zip Code NORTH AURORA, IL 60542	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLINER, BONNIE <hr/> Contributor address; City; State; Zip Code AVON, CT 06001	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLINER, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 309/4629 Rpt: 312/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLINER, SHARON <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77068	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLISS, JEREMY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) MULTNOMAH EDUCATION SERVICE DISTRICT
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERLISS, JEREMY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) MULTNOMAH EDUCATION SERVICE DISTRICT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, BETSY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, BETSY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 310/4629 Rpt: 313/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, BETSY <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30306	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, BETSY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, BETSY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, BETSY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMAN, LAWRENCE <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 311/4629 Rpt: 314/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMEL, HONEY <hr/> 6 Contributor address; City; State; Zip Code VANCOUVER, WA 98686	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERN, LILIAN <hr/> Contributor address; City; State; Zip Code ROGERS, AR 72756	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD, JOHN <hr/> Contributor address; City; State; Zip Code SCHAUMBURG, IL 60194	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD, JOHN <hr/> Contributor address; City; State; Zip Code SCHAUMBURG, IL 60194	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD, JOHN <hr/> Contributor address; City; State; Zip Code SCHAUMBURG, IL 60194	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 312/4629 Rpt: 315/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD, JOHN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SCHAUMBURG, IL 60194		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SCHAUMBURG, IL 60194		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD-PEARL, LISA	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code ALBANY, CA 94706		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARD-PEARL, LISA	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code ALBANY, CA 94706		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARDHARRIS, RITA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90056		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 313/4629 Rpt: 316/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARDHARRIS, RITA <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90056	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARDHARRIS, RITA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARDHARRIS, RITA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNARDI, ROSEMARIE <hr/> Contributor address; City; State; Zip Code KEENE, NH 03431	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARD, BRION <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING MANAGER		Employer (See Instructions) TEXAS A&M UNIVERSITY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 314/4629 Rpt: 317/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARD, KEITH <hr/> 6 Contributor address; City; State; Zip Code TOLEDO, OH 43607	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARD, KEITH <hr/> Contributor address; City; State; Zip Code TOLEDO, OH 43607	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARD, KEITH <hr/> Contributor address; City; State; Zip Code TOLEDO, OH 43607	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARD, KEITH <hr/> Contributor address; City; State; Zip Code TOLEDO, OH 43607	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARD, KEITH <hr/> Contributor address; City; State; Zip Code TOLEDO, OH 43607	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 315/4629 Rpt: 318/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94705	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, ANTHONY <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, ANTHONY <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, NECHAMA <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21209-1550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) TEXAS FAIR DEFENSE PROJECT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 316/4629 Rpt: 319/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, REBECCA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		9 Employer (See Instructions) TEXAS FAIR DEFENSE PROJECT
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNHARDT, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) TEXAS FAIR DEFENSE PROJECT
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NASA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NASA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, KATHRYN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60610	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) PUBLIC HEALTH NUTRITION		Employer (See Instructions) ILLINOIS PUBLIC HEALTH INSTITUTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 317/4629 Rpt: 320/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60610	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) PUBLIC HEALTH NUTRITION		9 Employer (See Instructions) ILLINOIS PUBLIC HEALTH INSTITUTE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, KATHRYN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60610	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) PUBLIC HEALTH NUTRITION		Employer (See Instructions) ILLINOIS PUBLIC HEALTH INSTITUTE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, KENNETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERNSTEIN, PATRICIA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) BERNSTEIN & ASSOCIATES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEROSINI, FONDA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) COMMUNICATION		Employer (See Instructions) DISNEY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 318/4629 Rpt: 321/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEROUKHIM, KATIE <hr/> 6 Contributor address; City; State; Zip Code CARDIFF, CA 92007	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TRAINER		9 Employer (See Instructions) FEEL GOOD YOGA & WELLNESS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEROZA, ANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) ALTUS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, BEA <hr/> Contributor address; City; State; Zip Code ASHLAND, OR 97520	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) NURSE MANAGER		Employer (See Instructions) WELLNESS 2000 INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, BEA <hr/> Contributor address; City; State; Zip Code ASHLAND, OR 97520	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NURSE MANAGER		Employer (See Instructions) WELLNESS 2000 INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 319/4629 Rpt: 322/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, KATHY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, KATHY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, MARY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) DELTA AIRLINES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, MELISSA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEXAS DISPOSAL SYSTEMS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, MELISSA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEXAS DISPOSAL SYSTEMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 320/4629 Rpt: 323/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, REBECCA <hr/> 6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, ROBIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDITOR/PUBLISHER		Employer (See Instructions) TCEQ
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, ROBIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDITOR/PUBLISHER		Employer (See Instructions) TCEQ
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, SUZANNE <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRY, SUZANNE <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 321/4629 Rpt: 324/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRYMAN, LESLIE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERRYMAN, LESLIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERSIN, COLBY	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) MANUFACTURING		Employer (See Instructions) TEXAS INSTRUMENTS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERSIN, COLBY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERT, CHRISTOPHER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code YPSILANTI, MI 48105		
Principal occupation / Job title (See Instructions) GRADUATE STUDENT		Employer (See Instructions) UNIVERSITY OF MICHIGAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 322/4629 Rpt: 325/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERT, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code YPSILANTI, MI 48105	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) GRADUATE STUDENT		9 Employer (See Instructions) UNIVERSITY OF MICHIGAN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERTHIAUME, LOUIS <hr/> Contributor address; City; State; Zip Code RIVERVIEW, FL 33569	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERTHOLET, PAUL <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21212	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) YES		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERTOLON, ALYSSA <hr/> Contributor address; City; State; Zip Code PEABODY, MA 01960	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) ALYSSA BERTOLON
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERTOZZI, LINDA <hr/> Contributor address; City; State; Zip Code LK HAVASU CITY, AZ 86406	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 323/4629 Rpt: 326/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERTRAND, ROBERT <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) REPRESENTATIVE		9 Employer (See Instructions) PRIMERICA
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERTZ, JOE <hr/> Contributor address; City; State; Zip Code APO, AE 09131	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BESHARA, ANGELLA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LEARNING STRSTEGIST		Employer (See Instructions) APPLE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BESSON, JONATHAN <hr/> Contributor address; City; State; Zip Code PITTSBURG, CA 94565-7926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) ORACLE USA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BESSON, JONATHAN <hr/> Contributor address; City; State; Zip Code PITTSBURG, CA 94565-7926	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) ORACLE USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 324/4629 Rpt: 327/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BESSON, JONATHAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PITTSBURG, CA 94565-7926		
8 Principal occupation / Job title (See Instructions) IT CONSULTANT		9 Employer (See Instructions) ORACLE USA
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BESSON, JONATHAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PITTSBURG, CA 94565-7926		
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) ORACLE USA
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEST, DANIEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SANTA FE, NM 87505		
Principal occupation / Job title (See Instructions) FAMILY THERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEST, JEAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RUSTON, WA 98407		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEST, JEAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code RUSTON, WA 98407		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 325/4629 Rpt: 328/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETH, WENDY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code ANN ARBOR, MI 48105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHARD, LAURA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ALLSTON, MA 02134		
Principal occupation / Job title (See Instructions) PUBLICATIONS		Employer (See Instructions) NBER
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHARD, LAURA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ALLSTON, MA 02134		
Principal occupation / Job title (See Instructions) PUBLICATIONS		Employer (See Instructions) NBER
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHEL, MARNIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUNT, TX 78024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHEL, MARNIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUNT, TX 78024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 326/4629 Rpt: 329/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHEL, MARNIE <hr/> 6 Contributor address; City; State; Zip Code HUNT, TX 78024	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHEL, MARNIE <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHELL, ANNE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97205	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHELL, ANNE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETKE, SOPHIE <hr/> Contributor address; City; State; Zip Code MONTROSE, CA 91020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 327/4629 Rpt: 330/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETTAREL, ROBIN <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20007	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETTERS, KARLA <hr/> Contributor address; City; State; Zip Code WAUKESHA, WI 53186-1206	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTING ASSISTANT		Employer (See Instructions) BETTERS & ASSOCIATES SC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETTERTON, KEITH <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETTS, BENTLEY <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) UNDERWRITER		Employer (See Instructions) SOMPO INTL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEU, STEVE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 328/4629 Rpt: 331/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEVERSDORF, ANNE	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78750		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEVIER, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78705		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ODYSSEY SCHOOL
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEVIER, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78705		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ODYSSEY SCHOOL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYDA, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20037		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYDA, MARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20037		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 329/4629 Rpt: 332/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEYER, MONICA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11210-1125		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 330/4629 Rpt: 333/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BHAT, GOUTHAM <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) GUSTO, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BHAT, JOYCE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60607	Amount of Contribution (\$) \$25.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BHAUMIK, SUMITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BHOJANI, SALMAN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BHOJANI LAW PLLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BHOJANI, SALMAN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BHOJANI LAW PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 331/4629 Rpt: 334/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BI, LINDA <hr/> 6 Contributor address; City; State; Zip Code GENEVA, IL 60134	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIADGELGNE, ABRAHAM <hr/> Contributor address; City; State; Zip Code SUGARLAND, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED FROM CHEVRON		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIANCHI, FELICIA <hr/> Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) EMORY UNIVERSITY
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIBEAU, SHARON <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIBEAU, SHARON <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 332/4629 Rpt: 335/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIBEAU, SHARON <hr/> 6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIBEAU, SHARON <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BICKHAM, ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77093	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) YES		Employer (See Instructions) USPS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BICKLE, ROBERT <hr/> Contributor address; City; State; Zip Code APEX, NC 27502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIEHL, ALLISON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GERMAN AMERICAN ELEMENTARY SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 333/4629 Rpt: 336/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIEHL, ALLISON	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) GERMAN AMERICAN ELEMENTARY SCHOOL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIEHN, KENNETH	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ITHACA, NY 14850		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIELER, STEVE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HENRICO, VA 23229		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIERENS, JERRY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MILFORD, MI 48381-1625		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIERMAN, MOLLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94123		
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) ALPHABET

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 334/4629 Rpt: 337/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIGGER, ARNOLD THOMAS <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20015	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) FUSION ACADEMY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILANCIA, JAMES <hr/> Contributor address; City; State; Zip Code BREWER, ME 04412	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) BANGOR SCHOOL DEPARTMENT
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILKEY, AMY W <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30328	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILKEY, AMY W <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30328	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILLINGS, ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) GM FINANCIAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 335/4629 Rpt: 338/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILLINGS, ELLEN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) GM FINANCIAL
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILLINGS, ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) GM FINANCIAL
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILLINGTON, REGINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILZ, REED <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINDEMAN, JENNIFER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) REALPAGE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 336/4629 Rpt: 339/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINGMAN, REBECCA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINGMAN, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINGMAN, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINNEY, ROBERT <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02114	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) EVP		Employer (See Instructions) THE HUDSON GROUP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINSACCA, MEREDITH <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 337/4629 Rpt: 340/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINSACCA, MEREDITH <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINSACCA, MEREDITH <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINSACCA, MEREDITH <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BINSLEY, JEROME <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRCH, DENTON <hr/> Contributor address; City; State; Zip Code MALABAR, FL 32950	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 338/4629 Rpt: 341/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRCHFIELD, THOMAS	7 Amount of Contribution (\$) \$12.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76104		
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRCHFIELD, THOMAS	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76104		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRD, CORNELIUS	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code ATLANTA, GA 30341		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRD, CORNELIUS	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ATLANTA, GA 30341		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRDWELL, CARMEL	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 339/4629 Rpt: 342/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRK, JOY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ANGLETON, TX 77515		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRK, JOY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ANGLETON, TX 77515		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRKE, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23451		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRKE, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23451		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRKE, CAROL	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23451		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 340/4629 Rpt: 343/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRKE, CAROL <hr/> 6 Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23451	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) THERAPIST		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRNBAUM HOOD, SARA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRNBAUM HOOD, SARA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRNS, EILEEN <hr/> Contributor address; City; State; Zip Code GREAT NECK, NY 11021	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIRR, DEBORAH <hr/> Contributor address; City; State; Zip Code GRAHAM, NC 27253	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 341/4629 Rpt: 344/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISBEE, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LEANDER ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISCHOFF, ALEXANDER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISCHOFSHAUSEN, SHARON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PART TIME PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) TPEA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, DONNA <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 342/4629 Rpt: 345/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, DONNA <hr/> 6 Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, JEAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROSLYN PUBLIC SCHOOLS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, JEAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROSLYN PUBLIC SCHOOLS
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, JEFF <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84103	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) KEY CAPTURE ENERGY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, JEFF <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84103	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) KEY CAPTURE ENERGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 343/4629 Rpt: 346/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, KATHRYNE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 344/4629 Rpt: 347/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISNO, BARBARA <hr/> 6 Contributor address; City; State; Zip Code MIAMI BEACH, FL 33139	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISSONETTE, SUSAN <hr/> Contributor address; City; State; Zip Code BURNSVILLE, MN 55337	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIXBY, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR CONSULTANT		Employer (See Instructions) RED SHOE CONSULTING
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIXBY, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR CONSULTANT		Employer (See Instructions) RED SHOE CONSULTING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIXBY, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR CONSULTANT		Employer (See Instructions) RED SHOE CONSULTING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 345/4629 Rpt: 348/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIXBY, MELISSA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) HR CONSULTANT		9 Employer (See Instructions) RED SHOE CONSULTING
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BJURSTROM, JANICE <hr/> Contributor address; City; State; Zip Code STATHAM, GA 30666-2539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACHMAN, MORRIS <hr/> Contributor address; City; State; Zip Code COLUMBIA, SC 29201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACADEMIC		Employer (See Instructions) UNIVERSITY OF SOUTH CAROLINA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, ALBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) PROFESSIONAL		Employer (See Instructions) DIRECTOR
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, JOHN <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LANDSCAPE DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 346/4629 Rpt: 349/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, JUNE <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, JUNE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, JUNE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, KATE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DRTX
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$24.96
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 347/4629 Rpt: 350/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$22.88
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, PATTI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 79749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, PETER <hr/> Contributor address; City; State; Zip Code SOMERVILLE, MA 02143	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 348/4629 Rpt: 351/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, SYLVIA <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97221	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, TRE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) ON-TARGET
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, VICKI <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, VICKI <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKARD, PATRICK M <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VIDEOGRAPHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 349/4629 Rpt: 352/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKARD, PATRICK M <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) VIDEOGRAPHER		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKARD, PATRICK M <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VIDEOGRAPHER		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKARD, PATRICK M <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VIDEOGRAPHER		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKARD, PATRICK M <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VIDEOGRAPHER		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKBURN, JIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BLACKBURN CARTER LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 350/4629 Rpt: 353/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKBURN, KELLY <hr/> 6 Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) DURHAM PITTARD & SPALDING, LLP
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKBURN, LLEWELLYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75203	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKBURN, ROBIN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) STRATFOR
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKBURN, ROBIN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) STRATFOR
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMAN, CHARLOTTE A <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60628	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 351/4629 Rpt: 354/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMAN, KAREN <hr/> 6 Contributor address; City; State; Zip Code HASLETT, MI 48840	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) MICHIGAN STATE UNIVERSITY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMON, FAYE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMON, FAYE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMON, FRANCES FAYE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMON, FRANCES FAYE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 352/4629 Rpt: 355/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMON, FRANCES FAYE <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKMORE, JANETTA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$58.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKSON, STEVE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LANDSCAPE DESIGN		Employer (See Instructions) WINDY POINT GARDEN RAILROADS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKWELL, ALOIS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77001	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKWELL, DEBORAH <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M INTERNATIONAL UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 353/4629 Rpt: 356/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAIR, LISA <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77554	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) THE SUNFLOWER BAKERY & CAFE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAIR, LISA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) THE SUNFLOWER BAKERY & CAFE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, SHEILA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77253	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SHEILA BLAKE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, SHEILA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77253	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUNICIPAL EMPLOYEE		Employer (See Instructions) CITY OF HOUSTON
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, SHEILA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77253	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUNICIPAL EMPLOYEE		Employer (See Instructions) CITY OF HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 354/4629 Rpt: 357/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKELY, BARRY <hr/> 6 Contributor address; City; State; Zip Code WILLISTON, VT 05495	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKELY, BARRY <hr/> Contributor address; City; State; Zip Code WILLISTON, VT 05495	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKELY, BARRY <hr/> Contributor address; City; State; Zip Code WILLISTON, VT 05495	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKENEY, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKENEY, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 355/4629 Rpt: 358/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKESLEE, BETSEY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, CO 80444	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKESLEE, BETSEY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, CO 80444	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANC, PHILIPPE <hr/> Contributor address; City; State; Zip Code WHITSETT, NC 27377	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIRBUS AMERICA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANC, PHILIPPE <hr/> Contributor address; City; State; Zip Code WHITSETT, NC 27377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIRBUS AMERICA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANC, PHILIPPE <hr/> Contributor address; City; State; Zip Code WHITSETT, NC 27377	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIRBUS AMERICA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 356/4629 Rpt: 359/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANC, PHILIPPE <hr/> 6 Contributor address; City; State; Zip Code WHITSETT, NC 27377	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) AIRBUS AMERICA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANC, PHILIPPE <hr/> Contributor address; City; State; Zip Code WHITSETT, NC 27377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIRBUS AMERICA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANCHARD, HEATHER <hr/> Contributor address; City; State; Zip Code ABINGTON, MA 02351	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) ACCOUTANT		Employer (See Instructions) YOUR PART-TIME CONTROLLER
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANCHARD, HEATHER <hr/> Contributor address; City; State; Zip Code ABINGTON, MA 02351	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) ACCOUTANT		Employer (See Instructions) YOUR PART-TIME CONTROLLER
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANCHARD, KATHRYN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 357/4629 Rpt: 360/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANCHARD, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, JENNIFER <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, JENNIFER <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, JULIAN <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, JULIAN <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 358/4629 Rpt: 361/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, PHYLLIS	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, PHYLLIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAND, ROLLIE	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code YONKERS, NY 10710		
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) UNITED AIRLINES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANKSTEIN, REBECCA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code DAYTON, NJ 08810		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) HJAH AN FQHC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANKSTEIN, REBECCA	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code DAYTON, NJ 08810		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) HJAH AN FQHC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 359/4629 Rpt: 362/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, CARLOS <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TAMU
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, CARLOS <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TAMU
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-2208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-2208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-2208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 360/4629 Rpt: 363/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, JACK	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77027		
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) BLANTON DRILL 2024
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, TERESA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, TERESA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, TERESA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, TERESA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 361/4629 Rpt: 364/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLATNEY, ALYSON <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) AKERMAN LLP
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLATNICKY, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN ENGINEER		Employer (See Instructions) RYDER INTEGRATED LOGISTICS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLATNICKY, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN ENGINEER		Employer (See Instructions) RYDER INTEGRATED LOGISTICS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEAKLEY, REBECCA <hr/> Contributor address; City; State; Zip Code TAUNTON, MA 02780	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEAKLEY, REBECCA <hr/> Contributor address; City; State; Zip Code TAUNTON, MA 02780	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 362/4629 Rpt: 365/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEICH, TAMMY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code CLEVELAND, OH 44143		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEICH, TAMMY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CLEVELAND, OH 44143		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLESSING, LESLEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLESSING, LESLEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLESSINGER, YADY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) FORT BEND ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 363/4629 Rpt: 366/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLETTERMAN, BERNIE <hr/> 6 Contributor address; City; State; Zip Code COPAKE, NY 12516-0183	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLETTERMAN, BERNIE <hr/> Contributor address; City; State; Zip Code COPAKE, NY 12516-0183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, DONNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, DONNA J <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, DONNA J <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 364/4629 Rpt: 367/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, JANA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) TEXAS UMS LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLEVINS, JANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TEXAS UMS LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLICK, SUZANNE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code SIOUX FALLS, SD 57104		
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLICK, SUZANNE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SIOUX FALLS, SD 57104		
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLICK, SUZANNE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code SIOUX FALLS, SD 57104		
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 365/4629 Rpt: 368/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLIER, STEVEN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10025	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) MUSICIAN		9 Employer (See Instructions) JUILLIARD SCHOOL
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLIER, STEVEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) JUILLIARD SCHOOL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLINN, JAMES <hr/> Contributor address; City; State; Zip Code OFALLON, MO 63368	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) CONFLUENCE DISCOVERY TECHNOLOGIES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLIVEN, GEORGE <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87507	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HUMAN DESIGN AMERICA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLIZZARD, JAMES <hr/> Contributor address; City; State; Zip Code PALM HARBOR, FL 34683	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 366/4629 Rpt: 369/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLIZZARD, JAMES <hr/> 6 Contributor address; City; State; Zip Code PALM HARBOR, FL 34683	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOBNER, WILLIAM <hr/> Contributor address; City; State; Zip Code WAUNAKEE, WI 53597	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCH, ANNE MARIE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCH, ANNE-MARIE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94618	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, DELORES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EXP REALTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 367/4629 Rpt: 370/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, DELORES <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) EXP REALTY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, DELORES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EXP REALTY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, MARY <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, MARY <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, NATHAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 368/4629 Rpt: 371/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, NATHAN <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) BP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, ROBINSON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) HOUSTON FIRE DEPARTMENT
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOCK, ROBINSON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) HOUSTON FIRE DEPARTMENT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLODGETT, ELAINE <hr/> Contributor address; City; State; Zip Code MCDADE, TX 78650	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLODGETT, ELAINE <hr/> Contributor address; City; State; Zip Code MCDADE, TX 78650	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 369/4629 Rpt: 372/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLODGETT, ELAINE <hr/> 6 Contributor address; City; State; Zip Code MCDADE, TX 78650	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOEMKER, DAVID <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EMERSON
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOG, SARAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KBR
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOLAND, SUE <hr/> Contributor address; City; State; Zip Code HASTINGS ON HUDSON, NY 10706-1417	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOLAND, SUE <hr/> Contributor address; City; State; Zip Code HASTINGS ON HUDSON, NY 10706-1417	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 370/4629 Rpt: 373/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOOM, JACOB <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, MA 02476	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOOMFIELD, BARRY <hr/> Contributor address; City; State; Zip Code MESA, AZ 85212	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOUNT, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS SCHOOL OF LAW
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOW, GERALD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOWERS, MARGARET <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 371/4629 Rpt: 374/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLOWERS, MEG <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) HAIRDRESSER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUM, HOWARD <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUM, JERRY <hr/> Contributor address; City; State; Zip Code ARLINGTON, MA 02476	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) MAIMONIDES SCHOOL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUM, LIGIA L <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) EXECUTIVE OPERATIONS MANAGER		Employer (See Instructions) CODE3
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUMBERG, STEVEN <hr/> Contributor address; City; State; Zip Code DENVER, CO 80222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SALES REP		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 372/4629 Rpt: 375/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUMENTHAL, ALYSSA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LONG BEACH, NY 11561		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) CON EDISON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUMENTHAL, ALYSSA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11215		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CON EDISON
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUMM, RICHARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BETHESDA, MD 20817		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOAK, DEBORAH	Amount of Contribution (\$) \$145.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOARDMAN, CHARLES	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code MADISION, WI 53711		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 373/4629 Rpt: 376/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOATTI, ANDREW <hr/> 6 Contributor address; City; State; Zip Code BRONX, NY 10463	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) FLYWHEEL SPORTS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOATTI, ANDREW <hr/> Contributor address; City; State; Zip Code BRONX, NY 10463	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FLYWHEEL SPORTS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBO, BRENDA <hr/> Contributor address; City; State; Zip Code MYRTLE BEACH, SC 29572	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBRICK, ELIZABETH <hr/> Contributor address; City; State; Zip Code MIDDLETOWN, CT 06457	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBRICK, ELIZABETH <hr/> Contributor address; City; State; Zip Code MIDDLETOWN, CT 06457	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 374/4629 Rpt: 377/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBRICK, ELIZABETH	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code MIDDLETOWN, CT 06457		
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBRICK, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) AFT OF TEXAS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBRICK, WILLIAM	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) AFT OF TEXAS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOBS, DEBORAH	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) SCHLUMBERGER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOCK, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DETROIT, MI 48202		
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) GRACE EPISCOPAL CHURCH

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 375/4629 Rpt: 378/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOCOCK, HMV <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20015	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		9 Employer (See Instructions) EDUCATIONAL ASSESSMENT ASSOCIATES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOCOCK, HMV <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) EDUCATIONAL ASSESSMENT ASSOCIATES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BODOVSKY, GREG <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT PROFESSIONAL		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BODOVSKY, GREG <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT PROFESSIONAL		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BODOVSKY, GREG <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT PROFESSIONAL		Employer (See Instructions) TARLETON STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 376/4629 Rpt: 379/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BODOVSKY, GREG <hr/> 6 Contributor address; City; State; Zip Code HILLSBORO, TX 76645	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) IT PROFESSIONAL		9 Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BODOVSKY, GREG <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT PROFESSIONAL		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOEDECKER, AVIVA <hr/> Contributor address; City; State; Zip Code TIBURON, CA 94920	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOEHME, PAULA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOEHME, PAULA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 377/4629 Rpt: 380/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOEHME, PAULA <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76016	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERNER, BRENDAN <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERNER, BRENDAN <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) GREAT POINT CAPITAL, LLC
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERNER, BRENDAN <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) SELF
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERNER, BRENDAN <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 378/4629 Rpt: 381/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERNER, JEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) SELF REALLY AUSTIN
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOESCHEN, DANIEL <hr/> Contributor address; City; State; Zip Code ST HELENA, CA 94574	Amount of Contribution (\$) \$2,024.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOESE, LARRY <hr/> Contributor address; City; State; Zip Code ELK GROVE, CA 95624	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) EDUCATION CONSULTING		Employer (See Instructions) SELF EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOESE, LARRY <hr/> Contributor address; City; State; Zip Code ELK GROVE, CA 95624	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) EDUCATION CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOESEL, MINNETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 379/4629 Rpt: 382/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOETTCHER, STEVEN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SALE, DC 20000		
8 Principal occupation / Job title (See Instructions) COUNSELLOR		9 Employer (See Instructions) STEVE BOETTCHER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOETTCHER, STEVEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SALE, DC 20000		
Principal occupation / Job title (See Instructions) COUNSELLOR		Employer (See Instructions) STEVE BOETTCHER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, BARBARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ELGIN, TX 78621		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASTROP COUNTY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, BARBARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ELGIN, TX 78621		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASTROP COUNTY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, BILLIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 380/4629 Rpt: 383/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, DAVID <hr/> 6 Contributor address; City; State; Zip Code MENLO PARK, CA 94025	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, DAVID <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, DAVID <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGART, DAVID <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGERT, JAMES <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 381/4629 Rpt: 384/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGERT, JAMES <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PROPERTY MANAGER		9 Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGERT, PAULETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGERT, PAULETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGERT, TRACY <hr/> Contributor address; City; State; Zip Code VON ARMY, TX 78073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JOURNEYMAN PLUMBER		Employer (See Instructions) UNITED ASSOCIATION OF PLUMBERS AND PIPEFITTERS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGGS, ASHLEY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) ADOBE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 382/4629 Rpt: 385/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGHS, MARIBEL	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240		
8 Principal occupation / Job title (See Instructions) PHYSICAL THERAPY		9 Employer (See Instructions) CANTEX
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOGLE, BASIL DON	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code POMPANO BEACH, FL 33321		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOHANNON, KATHREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) KISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOHLEN, AVIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOHM, HANNAH	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code GRANBURY, TX 76048		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 383/4629 Rpt: 386/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOISSEAU, THERESA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOKHOUR, ED <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ENGINEERING R		Employer (See Instructions) TAG SAFETY SYSTEMS INC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAN, NANCY <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, NY 10552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC HEALTH		Employer (See Instructions) WORLD VISION
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAN, NANCY <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, NY 10552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC HEALTH		Employer (See Instructions) WORLD VISION
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAN, NANCY <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, NY 10552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC HEALTH		Employer (See Instructions) WORLD VISION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 384/4629 Rpt: 387/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAN, NANCY <hr/> 6 Contributor address; City; State; Zip Code MOUNT VERNON, NY 10552	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PUBLIC HEALTH		9 Employer (See Instructions) WORLD VISION
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAN, NANCY <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, NY 10552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC HEALTH		Employer (See Instructions) WORLD VISION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAND, RICHARD <hr/> Contributor address; City; State; Zip Code CHAGRIN FALLS, OH 44023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAND, WILLIAM <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSIOLOGIST		Employer (See Instructions) BODYFIX METHOD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLAND, WILLIAM <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSIOLOGIST		Employer (See Instructions) BODYFIX METHOD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 385/4629 Rpt: 388/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLEVICE, DAVID	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code PHILMONT, NY 12565		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLEVICE, DAVID	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PHILMONT, NY 12565		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLLETINO, AIMEE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AIMEE BOLLETINO
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLLIN, BRANDY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) INFOTRACK
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLLIN, BRANDY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) INFOTRACK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 386/4629 Rpt: 389/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLNER, KATHY <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLNER, KATHY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLSTORFF, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) ST DAVIDS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLSTORFF, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) ST DAVIDS
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLSTORFF, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) ST DAVIDS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 387/4629 Rpt: 390/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLTON, JACALYN <hr/> 6 Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48322	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOLTON, JACALYN <hr/> Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48322	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOND, DAVID <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HOTELIER		Employer (See Instructions) NANSAD HOSPITALITY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOND, INGRID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOND, INGRID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 388/4629 Rpt: 391/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOND, JAY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76114	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONE, KATHRYN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONE, KATHRYN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONE, SANDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONILLA, LISA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) PFISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 389/4629 Rpt: 392/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONIN, KEITH <hr/> 6 Contributor address; City; State; Zip Code WINSTONSALEM, NC 27106	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR OF PHYSCS		9 Employer (See Instructions) WAKE FOREST UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNEFOYLEV, LINDA <hr/> Contributor address; City; State; Zip Code TIJERAS, NM 87059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNELL, KAREN <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, DAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, DAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 390/4629 Rpt: 393/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LECTURER		9 Employer (See Instructions) UT DALLAS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, FERREL <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, FERREL <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, FERREL <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, MARGARET <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 391/4629 Rpt: 394/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, MARGARET	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, MARGARET	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MONTGOMERY, TX 77356		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, MARGARET	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MONTGOMERY, TX 77356		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, TRACEY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76014		
Principal occupation / Job title (See Instructions) CODER		Employer (See Instructions) ACCLAIM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONNER, VALLERY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN RAFAEL, CA 94901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 392/4629 Rpt: 395/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONO, ELAINE <hr/> 6 Contributor address; City; State; Zip Code YARMOUTH PORT, MA 02675	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOK, MIRANDA <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOKER, NANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007-7031	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ART DEALER		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOKER, THOMAS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOONE, ALISON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 393/4629 Rpt: 396/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOONE, EDWARD <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOONE, SUSAN <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$78.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOPSINGH, DEBRA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMM MANAGER		Employer (See Instructions) RYAN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOPSINGH, DEBRA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMM MANAGER		Employer (See Instructions) RYAN
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOPSINGH, DEBRA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMM MANAGER		Employer (See Instructions) RYAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 394/4629 Rpt: 397/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOORSMA, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code SOUTH RANGE, WI 54874	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) CRANE OPERATOR		9 Employer (See Instructions) IUOE LOCAL # 49
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOORSMA, STEPHEN <hr/> Contributor address; City; State; Zip Code SOUTH RANGE, WI 54874	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CRANE OPERATOR		Employer (See Instructions) IUOE LOCAL # 49
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, EDIE <hr/> Contributor address; City; State; Zip Code CANTON, TX 75103	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, LINDA <hr/> Contributor address; City; State; Zip Code N RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, SANDEE <hr/> Contributor address; City; State; Zip Code LACOMBE, LA 70445	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONTENT CREATOR		Employer (See Instructions) SANDRA BOOTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 395/4629 Rpt: 398/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZE, VALERIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code WILMINGTON, NC 28409		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZE, VALERIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WILMINGTON, NC 28409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZE, VALERIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WILMINGTON, NC 28409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZE, VALERIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WILMINGTON, NC 28409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZE, VALERIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WILMINGTON, NC 28409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 396/4629 Rpt: 399/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZEL, JULIE <hr/> 6 Contributor address; City; State; Zip Code BA CLIFF, TX 77518	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES EXECUTIVE		9 Employer (See Instructions) CVS HEALTH
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOZEL, JULIE <hr/> Contributor address; City; State; Zip Code BA CLIFF, TX 77518	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES EXECUTIVE		Employer (See Instructions) CVS HEALTH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORD, STEFANIE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORD, STEFANIE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORD, STEFANIE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 397/4629 Rpt: 400/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORD, STEFANIE <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77379	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDELON, LOREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) POSITIVE ENERGY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDIE, RALPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDIE, RALPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDIE, RALPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 398/4629 Rpt: 401/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOREN, RYAN C. <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) AUTOMATTIC, INC.
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOREN, RYAN C. <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AUTOMATTIC, INC.
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOREN, RYAN C. <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AUTOMATTIC, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOREN, RYAN C. <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AUTOMATTIC, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOREN-AXELROD, REBECCA <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94595	Amount of Contribution (\$) \$16.66
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 399/4629 Rpt: 402/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORG OLDS, GLORIA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code PORTLAND, OR 97205-2477		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORGARD, MATTHEW	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) IBM
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORGES, KIMBERLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75220		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PWR WMN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORJON, JOSE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code BROWNSVILLE, TX 78520		
Principal occupation / Job title (See Instructions) SENIOR POLICY ADVISOR		Employer (See Instructions) AKIN GUMP
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORREGO, MEREDITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) MEREDITH BORREGO, CPA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 400/4629 Rpt: 403/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORREGO, MEREDITH <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) MEREDITH BORREGO, CPA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORTH, TERRY <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOS, DONALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL LIBRARIAN		Employer (See Instructions) AUSTIN ISD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOS, DONALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL LIBRARIAN		Employer (See Instructions) AUSTIN ISD
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOS, DONALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL LIBRARIAN		Employer (See Instructions) AUSTIN ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 401/4629 Rpt: 404/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOS, JAMES <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$13.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOS, JAMES <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSCH, MARY ELLEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSCH, MISSY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) NOTSUOH
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSCH, MISSY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) NOTSUOH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 402/4629 Rpt: 405/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSCO, CELESTE	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75219		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) BARON & BUDD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSCO, ELIZABETH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROYERSFORD, PA 19468		
Principal occupation / Job title (See Instructions) BANK EXAMINER		Employer (See Instructions) US TREASURY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSE, SARMILA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75024		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSE, SARMILA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PLANO, TX 75024		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSE, SARMILA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75024		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 403/4629 Rpt: 406/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSSERT, SUSAN <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSSERT, SUSAN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTIAN, BARBARA <hr/> Contributor address; City; State; Zip Code CATHEDRAL CITY, CA 92234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTIAN, BARBARA <hr/> Contributor address; City; State; Zip Code CATHEDRAL CITY, CA 92234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTIC, CARMENA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33186	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 404/4629 Rpt: 407/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTIC, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTON, GRANT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KHRALLAH BOSTON
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSTON, YVONNE <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33145	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSWELL, MARGARETTE <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOTHA, CHRISTINE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-2627	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SUPPORT		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 405/4629 Rpt: 408/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOTTICELLO, MADELINE <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20002	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR		9 Employer (See Instructions) CREATIVE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOTTS, THOMAS <hr/> Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23464	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUCHARD, JANET <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUCHARD, JANET <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUCHER, DONNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT/AUTHOR		Employer (See Instructions) SELF-EMPLOYED CONSULTANT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 406/4629 Rpt: 409/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUCHER, DONNA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT/AUTHOR		9 Employer (See Instructions) SELF-EMPLOYED CONSULTANT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUDINOT, JAMES <hr/> Contributor address; City; State; Zip Code TEGA CAY, SC 29708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUDREAU, MEGAN <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUFFARD, MAURICE <hr/> Contributor address; City; State; Zip Code ST JOHNSBURY, VT 05819	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUFFARD, MAURICE <hr/> Contributor address; City; State; Zip Code ST JOHNSBURY, VT 05819	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 407/4629 Rpt: 410/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUIE, SHAMIER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOULIA, LIZ <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) JEFF ADAMS INSURANCE AGENCY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOULIA, LIZ <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) JEFF ADAMS INSURANCE AGENCY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOULOS, ASSAD <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ANA INC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 408/4629 Rpt: 411/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78730		
8 Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		9 Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78730		
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78730		
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78730		
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78730		
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 409/4629 Rpt: 412/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78730	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		9 Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUNDS, SPENCER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE SPECIALIST		Employer (See Instructions) ALAFAIR BIOSCIENCES, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOURGEOIS, ELIZABETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOURLAND, GORDON <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BEHAVIOR ANALYST		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 410/4629 Rpt: 413/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOURQUE, JAMES <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWDEN, BERNARD <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37221	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWDEN, MONICA <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWDEN, MONICA <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWDEN, SALLY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 411/4629 Rpt: 414/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWE, ELSBETH <hr/> 6 Contributor address; City; State; Zip Code CONCORD, NH 03303	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWE, GEORGE <hr/> Contributor address; City; State; Zip Code MERCEDES, TX 78570	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWEN, GINGER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWER, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AMENTUM
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, ANNA <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) THR THFW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 412/4629 Rpt: 415/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, DONITA <hr/> 6 Contributor address; City; State; Zip Code CLEBURNE, TX 76033	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, DONITA <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, DONITA <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, JACK <hr/> Contributor address; City; State; Zip Code DOWNINGTOWN, PA 19335	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TECHNICAL DIRECTOR		Employer (See Instructions) QVC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, JOHN <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) JOHN BOWERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 413/4629 Rpt: 416/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, MARGARET <hr/> 6 Contributor address; City; State; Zip Code ST AUGUSTINE, FL 32095	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, MATT <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, MATT <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, REBECCA <hr/> Contributor address; City; State; Zip Code BROOKVILLE, OH 45309-9343	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, REBECCA <hr/> Contributor address; City; State; Zip Code BROOKVILLE, OH 45309-9343	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 414/4629 Rpt: 417/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, REBECCA <hr/> 6 Contributor address; City; State; Zip Code BROOKVILLE, OH 45309-9343	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS, REBECCA <hr/> Contributor address; City; State; Zip Code BROOKVILLE, OH 45309-9343	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS CAMPAIGN, RHETTA <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RHETTA BOWERS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERS CAMPAIGN, RHETTA <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RHETTA BOWERS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERSOCK, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 415/4629 Rpt: 418/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWERSOCK, ROBERT	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BEDFORD, TX 76021		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWHAY, ANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code OAK PARK, IL 60304		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLES, COLE	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253		
Principal occupation / Job title (See Instructions) POLITICAL CONSULTANT		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLES, COLE	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253		
Principal occupation / Job title (See Instructions) POLITICAL CONSULTANT		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLING, ROBERT	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) TROPICANA HOMES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 416/4629 Rpt: 419/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) POLICY ANALYST		9 Employer (See Instructions) STATE OF COLORADO
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, CATHERINE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) POLICY ANALYST		Employer (See Instructions) STATE OF COLORADO
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, CHRISTINE <hr/> Contributor address; City; State; Zip Code KINGSLAND, TX 78639	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ARC NUTRA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, EILEEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$3.84
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) THE CHILD SCHOOL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, JESSICA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) LEGAL AID OF NORTHWEST TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 417/4629 Rpt: 420/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, KYRA <hr/> 6 Contributor address; City; State; Zip Code HUNT, TX 78024	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, KYRA <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, SANDRA <hr/> Contributor address; City; State; Zip Code UNIVERSITY PLACE, WA 98466	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, SANDRA <hr/> Contributor address; City; State; Zip Code UNIVERSITY PLACE, WA 98466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, SANDRA <hr/> Contributor address; City; State; Zip Code UNIVERSITY PLACE, WA 98466	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 418/4629 Rpt: 421/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWMAN, SANDRA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code UNIVERSITY PLACE, WA 98466		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWN, CHRISTOPHER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SEABROOK, TX 77586		
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) HARRIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWYER, SUSAN	Amount of Contribution (\$) \$124.00
Contributor address; City; State; Zip Code OAKLAND, CA 94602		
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) MARTHA SENGER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWYER, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code OAKLAND, CA 94602		
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) MARTHA SENGER
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWYER, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code OAKLAND, CA 94602		
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) MARTHA SENGER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 419/4629 Rpt: 422/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWYER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CAREGIVER		9 Employer (See Instructions) MARTHA SENGER
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOX, BARBARA <hr/> Contributor address; City; State; Zip Code YARROW POINT, WA 98004	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOXENHORN, LYNNE <hr/> Contributor address; City; State; Zip Code POMPANO BEACH, FL 33066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOXENHORN, LYNNE <hr/> Contributor address; City; State; Zip Code POMPANO BEACH, FL 33066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOXENHORN, LYNNE <hr/> Contributor address; City; State; Zip Code POMPANO BEACH, FL 33066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 420/4629 Rpt: 423/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOXENHORN, LYNNE <hr/> 6 Contributor address; City; State; Zip Code POMPANO BEACH, FL 33066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOXENHORN, LYNNE <hr/> Contributor address; City; State; Zip Code POMPANO BEACH, FL 33066	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOXER, BARBARA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90049	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYAN, ELISE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYARIN, DANIEL <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94720-1940	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 421/4629 Rpt: 424/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> 6 Contributor address; City; State; Zip Code NESCONSET, NY 11767	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> Contributor address; City; State; Zip Code NESCONSET, NY 11767	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> Contributor address; City; State; Zip Code NESCONSET, NY 11767	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> Contributor address; City; State; Zip Code NESCONSET, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> Contributor address; City; State; Zip Code NESCONSET, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 422/4629 Rpt: 425/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code NESCONSET, NY 11767		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NESCONSET, NY 11767		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NESCONSET, NY 11767		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NESCONSET, NY 11767		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NESCONSET, NY 11767		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 423/4629 Rpt: 426/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> 6 Contributor address; City; State; Zip Code NESCONSET, NY 11767	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> Contributor address; City; State; Zip Code NESCONSET, NY 11767	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYCE, PHUONG <hr/> Contributor address; City; State; Zip Code NESCONSET, NY 11767	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, BRADY <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, BRIAN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SR. ENGINEER		Employer (See Instructions) EASE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 424/4629 Rpt: 427/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, CATHY <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, DAWN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KLEIN ISD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, DON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, GLORIA <hr/> Contributor address; City; State; Zip Code ATASCADERO, CA 93422	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, GLORIA <hr/> Contributor address; City; State; Zip Code ATASCADERO, CA 93422	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 425/4629 Rpt: 428/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, MARGARET <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10016	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) NYC PUBLIC SCHOOLS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, ROXANA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210-0249	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD, SAMUEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BOYD & ASSOCIATES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD-CORA, AMBER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYD-CORA, AMBER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 426/4629 Rpt: 429/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYER, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNIVERSITY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYER, LYNETTE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYKIN, DONNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYKIN, FREDERICK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYKINS, ROGET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 427/4629 Rpt: 430/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYLE, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731-1141	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) COMMUNITY VOLUNTEER		9 Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYLE, ELLEN <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) CAMBRIDGE HEALTH ALLIANCE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYT, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOYTER, HOLLY <hr/> Contributor address; City; State; Zip Code DUNCANVILLE, TX 75137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLAIMS PROCESSER		Employer (See Instructions) ESI HEALTHCARE SOLUTIONS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOZZOLO, ADRIAN <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 428/4629 Rpt: 431/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRACKMANN, EVE <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90024	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MUNCK WILSON MANDALA, LLP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADEN, LAYNE <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADEN, LEAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RELATIONSHIP MANAGER		Employer (See Instructions) BANK OF AMERICA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFIELD, GRETCHEN LOUISE <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFORD, ELIZABETH <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) BPR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 429/4629 Rpt: 432/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFORD, JEFFREY <hr/> 6 Contributor address; City; State; Zip Code BEVERLY, MA 01915	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) IT SVCS DIR.		9 Employer (See Instructions) MUSEUM OF FINE ARTS BOSTON
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFORD, JEFFREY <hr/> Contributor address; City; State; Zip Code BEVERLY, MA 01915	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT SVCS DIR.		Employer (See Instructions) MUSEUM OF FINE ARTS BOSTON
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFORD, TESSIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COORDINATOR		Employer (See Instructions) LONE STAR COLLEGE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADFORD, TESSIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COORDINATOR		Employer (See Instructions) LONE STAR COLLEGE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, DAVID <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTING/COLLECTIONS SUPERVISOR		Employer (See Instructions) DALLAS COUNTY DISTRICT CLERK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 430/4629 Rpt: 433/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, DUANE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF ST. THOMAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008-2410	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, SCHUYLER <hr/> Contributor address; City; State; Zip Code KIRKLAND, WA 98034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, SCHUYLER <hr/> Contributor address; City; State; Zip Code KIRKLAND, WA 98034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 431/4629 Rpt: 434/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY, SCHUYLER <hr/> 6 Contributor address; City; State; Zip Code KIRKLAND, WA 98034	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADRICK, ERIN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NEO LAW GROUP
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADRICK, ERIN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NEO LAW GROUP
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADRICK, ERIN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NEO LAW GROUP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADSHAW, R. BRUCE <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930-4141	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 432/4629 Rpt: 435/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, ANANDA <hr/> 6 Contributor address; City; State; Zip Code BOLINAS, CA 94924-0873	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, ANANDA <hr/> Contributor address; City; State; Zip Code BOLINAS, CA 94924-0873	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, ELLEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, JESSICA <hr/> Contributor address; City; State; Zip Code WAYNE, NJ 07470	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LABORATORY SCIENTIST		Employer (See Instructions) ALFA WASSERMANN
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, JESSICA <hr/> Contributor address; City; State; Zip Code WAYNE, NJ 07470	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LABORATORY SCIENTIST		Employer (See Instructions) ALFA WASSERMANN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 433/4629 Rpt: 436/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, JESSICA <hr/> 6 Contributor address; City; State; Zip Code WAYNE, NJ 07470	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LABORATORY SCIENTIST		9 Employer (See Instructions) ALFA WASSERMANN
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, REBECCA <hr/> Contributor address; City; State; Zip Code PERRY, OK 73077	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) PATAK
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, REBECCA <hr/> Contributor address; City; State; Zip Code PERRY, OK 73077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) PATAK
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADY, REBECCA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 434/4629 Rpt: 437/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAID, ROBERT <hr/> 6 Contributor address; City; State; Zip Code POMPANO BEACH, FL 33076	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GEN. CONTRACTOR		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAILEY, CARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) CARLA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAM, RACHEL <hr/> Contributor address; City; State; Zip Code HUNTINGTON, NY 11743	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAM, RACHEL <hr/> Contributor address; City; State; Zip Code HUNTINGTON, NY 11743	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAME, JUDGE ARGIE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ASSOCIATE JUDGE		Employer (See Instructions) FORT BEND COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 435/4629 Rpt: 438/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAMLETT, DON	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code ROCKFORD, IL 61108		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANCH, MARY ANGELA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANCH III, THELDON R	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025-1324		
Principal occupation / Job title (See Instructions) BUSINESS EXECUTIVE		Employer (See Instructions) BRANCH MCGOWEN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, GARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) FISERV
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, GARY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) FISERV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 436/4629 Rpt: 439/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, GARY <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75044	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) FISERV
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, GARY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) MINERALTREE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, GARY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) MINERALTREE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, ROBERTA <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAND, ROBERTA <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 437/4629 Rpt: 440/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANDON, SARAH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78737		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANNAN, RYAN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BRANNAN & ASSOCIATES
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANNEN, DEBRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SPRING, TX 77382		
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SELF-EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANNON, GLORIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NORMAN, OK 73072		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANSON, NICHOLAS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CARY, IL 60013		
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) COLLEGE OF LAKE COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 438/4629 Rpt: 441/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRATTON, BARBARA 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRATTON, BARBARA Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRATTON, LYNETTE Contributor address; City; State; Zip Code PEARLAND, TX 77046	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BRATTON & ASSOCIATES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAUN, BEV Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAUN, BEVERLY Contributor address; City; State; Zip Code SAN DIEGO, CA 92103	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 439/4629 Rpt: 442/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAVERMAN, ALAN <hr/> 6 Contributor address; City; State; Zip Code NY, NY 10018	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) BRAVERMAN CPA PC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAVO, MONICA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LIRA BRAVO LAW, PLLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAWLEY, ELLEN T <hr/> Contributor address; City; State; Zip Code EXETER, NH 03833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, LAURA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 440/4629 Rpt: 443/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, LAURA <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) WRITER/EDITOR		9 Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, LAURA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, LAURA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, LAURA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAY, LAURA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 441/4629 Rpt: 444/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRAZEE, MARY ANN <hr/> 6 Contributor address; City; State; Zip Code GREEN COVE SPRINGS, FL 32043	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREAUX, DARLENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77083	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) HARRIS COUNTY DEPARTMENT OF EDUCATION
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREAUX HERMANN, HEATHER <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREED, ROBIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDLOVE, ELIZABETH <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MEMBER BENEFITS		Employer (See Instructions) CSEA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 442/4629 Rpt: 445/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDLOVE, MARCIA <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77450	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDLOVE, NANCY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRODUCER		Employer (See Instructions) WPP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDLOVE, SCOTT <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDLOVE, SCOTT <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEDLOVE, SCOTT <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 443/4629 Rpt: 446/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEN, JILL <hr/> 6 Contributor address; City; State; Zip Code LARCHMONT, NY 10538	7 Amount of Contribution (\$) \$1,024.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEN, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) SETON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREEN, VICKI <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREGE, ANN-MARIE <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREGE, ANN-MARIE <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 444/4629 Rpt: 447/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITBARTH, ILENE <hr/> 6 Contributor address; City; State; Zip Code ADDISON, TX 75001	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LEGAL RECRUITER		9 Employer (See Instructions) TOWER LEGAL SOLUTIONS
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITENBUECHER, DAVID <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FARMERS BUSINESS NETWORK
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITENBUECHER, DAVID <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FARMERS BUSINESS NETWORK
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITMEYER, LORE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MACYS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITMEYER, LORE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MACYS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 445/4629 Rpt: 448/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITNER, PIETER <hr/> 6 Contributor address; City; State; Zip Code CORALVILLE, IA 52241	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE (RETIRED)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREITNER, PIETER <hr/> Contributor address; City; State; Zip Code CORALVILLE, IA 52241	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE (RETIRED)
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRELO, KAYCIE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNDERWRITER		Employer (See Instructions) DUAL NORTH AMERICA
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRELO, KAYCIE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNDERWRITER		Employer (See Instructions) DUAL NORTH AMERICA
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENDER, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 446/4629 Rpt: 449/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNAN, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) UNEMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNAN, CATHERINE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) UNEMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNAN, MAJE <hr/> Contributor address; City; State; Zip Code APO, AE 09128	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNAN, MAJE <hr/> Contributor address; City; State; Zip Code APO, AE 09128	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNER, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) GENERAL COUNSEL		Employer (See Instructions) CREDIT UNION DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 447/4629 Rpt: 450/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNER, KAREN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENNER, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESENHAN, KAREY <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BUSINESS EXECUTIVE		Employer (See Instructions) QUILTS, IL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESENHAN, KAREY <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BUSINESS EXECUTIVE		Employer (See Instructions) QUILTS, IL
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESENHAN, KAREY <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) BUSINESS EXECUTIVE		Employer (See Instructions) QUILTS, IL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 448/4629 Rpt: 451/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESENHAN, KAREY <hr/> 6 Contributor address; City; State; Zip Code LA GRANGE, TX 78945	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) BUSINESS EXECUTIVE		9 Employer (See Instructions) QUILTS, IL
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESLOW NEWHOUSE, ELLEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESLOW NEWHOUSE, ELLEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRESSEN, ANDREW <hr/> Contributor address; City; State; Zip Code SOMERVILLE, MA 02144	Amount of Contribution (\$) \$50.12
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRETT, OSCAR <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215-6245	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VIDEO EDITOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 449/4629 Rpt: 452/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRETT COOPER, M <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER, ANGELA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER, ANGELA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER, MARTHA <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30305	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER III, EARL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MAINTENANCE SPECIALIST		Employer (See Instructions) LONE STAR COLLEGE SYSTEM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 450/4629 Rpt: 453/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER III, EARL	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77095		
8 Principal occupation / Job title (See Instructions) MAINTENANCE SPECIALIST		9 Employer (See Instructions) LONE STAR COLLEGE SYSTEM
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWSTER, SHELLEY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) SPORTS DIRECTOR		Employer (See Instructions) PSA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWTON, DONNA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWTON, DONNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWTON, DONNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 451/4629 Rpt: 454/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRICKER, LINDA <hr/> 6 Contributor address; City; State; Zip Code DECATUR, GA 30030	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRICKER, LINDA <hr/> Contributor address; City; State; Zip Code DECATUR, GA 30030	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRICKHOUSE, MARK <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGE, JENNIFER <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94127	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) SFMOMA
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGE, LYNN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 452/4629 Rpt: 455/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGE, LYNN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGES, DEREK	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGES, FRANK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEWTON, MA 02459		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HERITAGE DESIGN LAW
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGES, FRANK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEWTON, MA 02459		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HERITAGE DESIGN LAW
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIDGES, SUSAN	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code BONITA SPRINGS, FL 34135		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 453/4629 Rpt: 456/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, ANNETTE <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, ANNETTE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, ANNETTE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, ANNETTE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, KERRY <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RIGHT OF WAY CONSULTANT		Employer (See Instructions) BRIGGS FIELD SERVICES, INC.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 454/4629 Rpt: 457/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, RUTH ANNETTE <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, SHIRLEY <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30078-2844	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, SHIRLEY <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30078-2844	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, SHIRLEY <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30078-2844	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGGS, SHIRLEY <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30078-2844	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGHT, BRENDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code CEDAR HILL, TX 75104		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIGHT, ELLIOTT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRANKLIN, TN 37064		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) STATE OF TENNESSEE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIKOWSKI, DIANN SMITH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) ANIMAL MEDICAL CENTER OF RICHARDSON BY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRILL, BETTYE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRILL, BETTYE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRININGER, PAMELA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code ROCHESTER HILLS, MI 48309		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRININGER, PAMELA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ROCHESTER HILLS, MI 48309		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, ANGIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95125		
Principal occupation / Job title (See Instructions) NONPROFIT DEVELOPMENT CONSULTANT		Employer (See Instructions) ANGIE BRIONES
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, EMMA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code HOUSTON, TX 77091		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, LESLEY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, LESLEY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) COMMISSIONER		9 Employer (See Instructions) HARRIS COUNTY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, LESLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) HARRIS COUNTY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRIONES, LESLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) HARRIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISCOE, JAMES <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISCOE, JAMES <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70125	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISCOE, JAMES <hr/> 6 Contributor address; City; State; Zip Code NEW ORLEANS, LA 70125	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISCOE, JAMES <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISLANE, JAMES <hr/> Contributor address; City; State; Zip Code ANDERSON, SC 29621	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MAITENANCE		Employer (See Instructions) ANDERSON COUNTY LIBRARY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISTOL, BRYAN <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISTOL, BRYAN <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRISTOL, TRACY <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034-3138	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRITO, MARSHA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRITO, MARSHA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRITT, ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRITTIN-FULTON, JENNIFER <hr/> Contributor address; City; State; Zip Code KAHULUI, HI 96732	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROADAWAY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code BOWIE, MD 20716	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) IT SPECIALIST		9 Employer (See Instructions) FED GOVT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROADRICK, CATHY <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROADRICK, CATHY <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROADRICK, CATHY <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROADWIN, RACHEL <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94610	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 461/4629 Rpt: 464/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROADWIN, RACHEL	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code OAKLAND, CA 94610		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROBST, JOHN	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code BEAUFORT, NC 28516		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, CECELIA	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054		
Principal occupation / Job title (See Instructions) CLAIMS DIRECTOR		Employer (See Instructions) MARSH MCLENNAN
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, DEANNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) VISA INC.
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, DEANNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) VISA INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 462/4629 Rpt: 465/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, ERIC <hr/> 6 Contributor address; City; State; Zip Code HALLETTSVILLE, TX 77964-2943	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FACTORY FLOOR EMPLOYEE		9 Employer (See Instructions) UTEX
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRYING TO SURVIVE UNTIL CHRISTMAS BREAK.		Employer (See Instructions) DALLAS ACADEMY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, PAMELA <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROCK, PAMELA <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODER, HARRIET <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20854	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) HEALTH COACH		Employer (See Instructions) SELF

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODMAN, KARA	7 Amount of Contribution (\$) \$26.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODSKY, NINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) BOOKKEEPER AND ARTIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, ROBERT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EAST HAMPTON, NY 11937		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, ROBERT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EAST HAMPTON, NY 11937		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, ROBERT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EAST HAMPTON, NY 11937		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 464/4629 Rpt: 467/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, ROBERT	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code EAST HAMPTON, NY 11937		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, ROBERT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EAST HAMPTON, NY 11937		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROGDEN, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEANDER, TX 78641		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROGDEN, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEANDER, TX 78641		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROLIN, GRANIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WATER MILL, NY 11976		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 465/4629 Rpt: 468/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROLL, GENEVIEVE	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code TRUCKEE, CA 96161		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROMKA, MICHAEL	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code CARLSBAD, NM 88221-2404		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROMLEY, RAY	Amount of Contribution (\$) \$6.75
Contributor address; City; State; Zip Code ALBANY, NY 12203		
Principal occupation / Job title (See Instructions) EMERITUS PROFESSOR		Employer (See Instructions) UNIVERSITY AT ALBANY, SUNY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROMLEY, RAY	Amount of Contribution (\$) \$6.75
Contributor address; City; State; Zip Code ALBANY, NY 12203		
Principal occupation / Job title (See Instructions) EMERITUS PROFESSOR		Employer (See Instructions) UNIVERSITY AT ALBANY, SUNY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROMLEY, RAY	Amount of Contribution (\$) \$6.75
Contributor address; City; State; Zip Code ALBANY, NY 12203		
Principal occupation / Job title (See Instructions) EMERITUS PROFESSOR		Employer (See Instructions) UNIVERSITY AT ALBANY, SUNY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 466/4629 Rpt: 469/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRONSTEIN, DALE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
8 Principal occupation / Job title (See Instructions) WINE MERCHANT		9 Employer (See Instructions) MR.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRONSTEIN, DALE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) WINE MERCHANT		Employer (See Instructions) MR.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRONSTEIN, DALE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) WINE MERCHANT		Employer (See Instructions) MR.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRONSTEIN, DALE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) WINE MERCHANT		Employer (See Instructions) MR.
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRONSTEIN, DALE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) WINE MERCHANT		Employer (See Instructions) MR.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 467/4629 Rpt: 470/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRONSTEIN, DALE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) WINE MERCHANT		9 Employer (See Instructions) MR.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOK, SARAH <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, DAVID <hr/> Contributor address; City; State; Zip Code UPTON, MA 01568	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, ELAINE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94606	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, ELAINE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94606	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 468/4629 Rpt: 471/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, JAMES <hr/> 6 Contributor address; City; State; Zip Code STILLWATER, NY 12170	7 Amount of Contribution (\$) \$33.32
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, JEFFREY <hr/> Contributor address; City; State; Zip Code CARTHAGE, TX 75633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, JERI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77010	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ONE WORLD STRATEGY GROUP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, JERI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ONE WORLD STRATEGY GROUP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, LYNN <hr/> Contributor address; City; State; Zip Code INDIAN RIVER, MI 49749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 469/4629 Rpt: 472/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, MATTHEW	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code RALEIGH, NC 27606		
8 Principal occupation / Job title (See Instructions) HUMAN RESOURCES		9 Employer (See Instructions) NC STATE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, MEG	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, PETER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75206		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, PETER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75206		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, PETER	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78751		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 470/4629 Rpt: 473/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, PETER <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, PETER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TAX COUNSEL		Employer (See Instructions) TAX COMPROLLER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKS, SHARI <hr/> Contributor address; City; State; Zip Code PACIFICA, CA 94044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RELEASE ENGINEER		Employer (See Instructions) GOOGLE LLC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROOKSHIRE, STEPHEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) ATLANTIC FINANCIAL MANAGERS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROSIUS, WILLIAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VP - FINANCE		Employer (See Instructions) METHODIST HEALTH SYSTEM

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 471/4629 Rpt: 474/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROSANAN, PETER <hr/> 6 Contributor address; City; State; Zip Code MONTEBELLO, CA 90640	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORK TRAINER		9 Employer (See Instructions) LA COUNTY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROSANAN, PETER <hr/> Contributor address; City; State; Zip Code MONTEBELLO, CA 90640	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) SOCIAL WORK TRAINER		Employer (See Instructions) LA COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROTHERTON, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77318	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 472/4629 Rpt: 475/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 473/4629 Rpt: 476/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUGHTON, LORI <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUSSARD, TIM <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUSSARD, TIM <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROUSSARD, TIM <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWDER, ERIN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90056-1613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PEOPLE CONSULTANT		Employer (See Instructions) CISCO

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 474/4629 Rpt: 477/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWDER, JAMIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$77.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ABRAHAM <hr/> Contributor address; City; State; Zip Code RICHFIELD, OH 44286	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, AISHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) FWISD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, AMY <hr/> Contributor address; City; State; Zip Code WESTLAKE HILLS, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) TEA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ANNETTE <hr/> Contributor address; City; State; Zip Code CEDAR HILL, TX 75104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY OF DALLAS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 475/4629 Rpt: 478/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CARYN	7 Amount of Contribution (\$) \$15.60
6 Contributor address; City; State; Zip Code WACO, TX 76712-9637		
8 Principal occupation / Job title (See Instructions) WEB DESIGNER		9 Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CARYN	Amount of Contribution (\$) \$15.60
Contributor address; City; State; Zip Code WACO, TX 76712-9637		
Principal occupation / Job title (See Instructions) WEB DESIGNER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CHARLES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BUFFALO, NY 14208		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CONRELL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE BROWN LAW GROUP
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CURTISS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 476/4629 Rpt: 479/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CURTISS <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CURTISS <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, CURTISS <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, DAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) COVERT
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, DEBORAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 477/4629 Rpt: 480/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, DENISE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICES OF DENISE ADKISON-BROWN PLLC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, DIANE <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87507	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, DONELLA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ELAINE <hr/> Contributor address; City; State; Zip Code CLEWISTON, FL 33440	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ELAINE <hr/> Contributor address; City; State; Zip Code CLEWISTON, FL 33440	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 478/4629 Rpt: 481/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GINA <hr/> 6 Contributor address; City; State; Zip Code MIRAMAR, FL 33027	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLENDA <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PRIVATE DUTY LVN		Employer (See Instructions) ROSA'S HOME HEALTHCARE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> Contributor address; City; State; Zip Code BONITA SPRINGS, FL 31045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> Contributor address; City; State; Zip Code BONITA SPRINGS, FL 34135	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> Contributor address; City; State; Zip Code BONITA SPRINGS, FL 31045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 479/4629 Rpt: 482/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> 6 Contributor address; City; State; Zip Code BONITA SPRINGS, FL 34135	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, GLORIA <hr/> Contributor address; City; State; Zip Code ATHENS, TX 75751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JAMARR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NATIONAL TRAINING DIRECTOR		Employer (See Instructions) TOM STEYER FOUNDATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 480/4629 Rpt: 483/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JAMARR <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NATIONAL TRAINING DIRECTOR		9 Employer (See Instructions) TOM STEYER FOUNDATION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JENNIFER <hr/> Contributor address; City; State; Zip Code LAWRENCE, KS 66049	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JEREMY <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GOVERNMENT EMPLOYEE		Employer (See Instructions) HARRIS COUNTY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JEREMY <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GOVERNMENT EMPLOYEE		Employer (See Instructions) HARRIS COUNTY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JEREMY <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GOVERNMENT EMPLOYEE		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 481/4629 Rpt: 484/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JERMACA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code FAIRFIELD, TX 75840		
8 Principal occupation / Job title (See Instructions) ORGANIZING DIRECTOR		9 Employer (See Instructions) DALLAS COUNTY DEMOCRATIC PARTY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JERMACA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FAIRFIELD, TX 75840		
Principal occupation / Job title (See Instructions) ORGANIZING DIRECTOR		Employer (See Instructions) DALLAS COUNTY DEMOCRATIC PARTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JONATHAN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) CTO		Employer (See Instructions) WICKFIRE, LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JOSEPH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SCHERTZ, TX 78108		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JOSEPH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SCHERTZ, TX 78108		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 482/4629 Rpt: 485/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, LESLIE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, LYNDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CORONA, CA 92883		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ADMAGIC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MANDY	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) ELEARNING DESIGNER		Employer (See Instructions) BERLITZ
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MANDY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) ELEARNING DESIGNER		Employer (See Instructions) BERLITZ
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MARGARITA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FAIRFAX, VA 22031		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 483/4629 Rpt: 486/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MARY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code NEW VIRGINIA, IA 50210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MEG	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77702		
Principal occupation / Job title (See Instructions) FAMILY NURSE PRACTITIONER		Employer (See Instructions) PRIMARY CARE ANYWHERE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MEG	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77702		
Principal occupation / Job title (See Instructions) FAMILY NURSE PRACTITIONER		Employer (See Instructions) PRIMARY CARE ANYWHERE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MEL	Amount of Contribution (\$) \$10.70
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) MEL BROWN
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, MOLLY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FRISCO, TX 75033		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) THREE ODD DOGS LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 484/4629 Rpt: 487/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, NATALIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) STREET TECHNOLOGY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, NEEMESHA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) NON PROFIT EXECUTIVE		Employer (See Instructions) PCI MEDIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, PAMELA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS RIOGRANDE LEGAL AID, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, PAMELA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS RIOGRANDE LEGAL AID, INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, PATTI <hr/> Contributor address; City; State; Zip Code GRAND BLANC, MI 48439	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 485/4629 Rpt: 488/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, R. PHILIP <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084-7204	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER/SUPERVISOR		9 Employer (See Instructions) HOUSTON COMMUNITY COLLEGE SYSTEM
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RANDY <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32804-7122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RANDY <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32804-7122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, REGINALD <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23220	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OFFICE ADMINISTRATOR		Employer (See Instructions) KJELLSTROM+LEE, INC.
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROBERT <hr/> Contributor address; City; State; Zip Code FIRCREST, WA 98466	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 486/4629 Rpt: 489/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROBERT	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code FIRCREST, WA 98466		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TARZAANA, CA 91356		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TARZAANA, CA 91356		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROBERT	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TERRELL, TX 75160		
Principal occupation / Job title (See Instructions) RANCHER/PRODUCTION MANAGER		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ROBERT	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TERRELL, TX 75160		
Principal occupation / Job title (See Instructions) RANCHER/PRODUCTION MANAGER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 487/4629 Rpt: 490/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, SANDY <hr/> 6 Contributor address; City; State; Zip Code WAYNE, NE 68787	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, SUSAN <hr/> Contributor address; City; State; Zip Code TAOS, NM 87571	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, SUZANNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, SUZANNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, SUZANNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 488/4629 Rpt: 491/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, TONY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code STONE MTN, GA 30087		
8 Principal occupation / Job title (See Instructions) INSURANCE AGENT		9 Employer (See Instructions) STATE FARM
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, VERONICA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNE, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WATERTOWN, MA 02472		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNE, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WATERTOWN, MA 02472		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNE, CHRIS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BTF LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 489/4629 Rpt: 492/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNELL, NANCY <hr/> 6 Contributor address; City; State; Zip Code BOWLING GREEN, OH 43402	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNELL, NANCY <hr/> Contributor address; City; State; Zip Code BOWLING GREEN, OH 43402	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNELL, NANCY <hr/> Contributor address; City; State; Zip Code BOWLING GREEN, OH 43402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNING, RUFUS <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNING, RUFUS <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 490/4629 Rpt: 493/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 491/4629 Rpt: 494/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 492/4629 Rpt: 495/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWNSCOMBE, TOM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROXTERMAN, CATHRYN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUBAKER, KENNETH <hr/> Contributor address; City; State; Zip Code WHITE SETTLEMENT, TX 76108	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) MATERIAL HANDLER		Employer (See Instructions) RYDER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 493/4629 Rpt: 496/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUBAKER, KENNETH <hr/> 6 Contributor address; City; State; Zip Code WHITE SETTLEMENT, TX 76108	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) MATERIAL HANDLER		9 Employer (See Instructions) RYDER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUCH, KAITLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) WILLIAMSON COUNTY JUVENILE SERVICES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUDER, LORA <hr/> Contributor address; City; State; Zip Code WILLIAMSTON, MI 48895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUDER, REBECCA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUEGGER, JOSEPH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75367	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) LAW OFFICE OF JOSEPH BRUEGGER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 494/4629 Rpt: 497/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUGGEMAN, NELDA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 79727	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) HCA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRULE, LINDA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUMLEY, NANCY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNDAGE, MILES <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94703	Amount of Contribution (\$) \$5,024.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNER, RENEE <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) GIVEBACKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 495/4629 Rpt: 498/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNER, RENEE <hr/> 6 Contributor address; City; State; Zip Code LOCKHART, TX 78644	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) GIVEBACKS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNETTE, BRUCE <hr/> Contributor address; City; State; Zip Code JUNEAU, AK 99801	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNETTE, BRUCE <hr/> Contributor address; City; State; Zip Code JUNEAU, AK 99801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNETTE, BRUCE <hr/> Contributor address; City; State; Zip Code JUNEAU, AK 99801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNI, SYLVIA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 496/4629 Rpt: 499/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNI, SYLVIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LAREDO, TX 78041		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNK, HOLLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code APTOS, CA 95003		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNK, LADONNA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ELDORA, IA 50627		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNO, STEVE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78756		
Principal occupation / Job title (See Instructions) STATE EMPLOYEE		Employer (See Instructions) STATE OF TEXAS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUSEGAR, CAROL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CYPRESS, CA 90630-3511		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 497/4629 Rpt: 500/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUSH, MARY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TUTOR/PARTTIME		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUSH, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TUTOR/PARTTIME		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUSNIAK, ROSARIO <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, ARTHUR L. <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HELLAS CONSTRUCTION, INC.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, HELEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 498/4629 Rpt: 501/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, HELEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, HERB <hr/> Contributor address; City; State; Zip Code MADISON, AL 35758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, OWEN <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33169	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN, SANDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-2004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYAN WILSON, DARCY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VIDEO PRODUCTION ASS		Employer (See Instructions) DLT CREATIVE MEDIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 499/4629 Rpt: 502/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, ALLISON <hr/> 6 Contributor address; City; State; Zip Code SEMINOLE, FL 33772	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) PINELLAS COUNTY SCHOOLS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, CHARLEY <hr/> Contributor address; City; State; Zip Code ST PETERSBURG, FL 33712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, CHARLEY <hr/> Contributor address; City; State; Zip Code ST PETERSBURG, FL 33712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, DEBI <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, DEBI <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 500/4629 Rpt: 503/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, DEBORAH	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77055		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, DONNA	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code HOUSTON, TX 77084		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, JUDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, KAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) COMMUNICATIONS MANAGER		Employer (See Instructions) MEDASSETS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, KAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) COMMUNICATIONS MANAGER		Employer (See Instructions) MEDASSETS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 501/4629 Rpt: 504/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, KAREN <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) COMMUNICATIONS MANAGER		9 Employer (See Instructions) MEDASSETS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, LEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030-2020	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, LEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030-2020	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, LEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030-2020	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, RANDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) POLITICS UNITED MARKETING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 502/4629 Rpt: 505/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, RANDALL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75201	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) POLITICS UNITED MARKETING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, RANDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) POLITICS UNITED MARKETING
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, RANDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) POLITICS UNITED MARKETING
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYCE, APRIL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CREATIVE DIRECTOR		Employer (See Instructions) HAVAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 503/4629 Rpt: 506/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYCE, APRIL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78750		
8 Principal occupation / Job title (See Instructions) CREATIVE DIRECTOR		9 Employer (See Instructions) HAVAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYSON, ARTHUR	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CRETE, IL 60417		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 504/4629 Rpt: 507/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78702		
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LILLIAN BUCHANAN
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 505/4629 Rpt: 508/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78702		
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LILLIAN BUCHANAN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LILLIAN BUCHANAN
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LILLIAN BUCHANAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 506/4629 Rpt: 509/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, LILLIAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78702	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, M BETH <hr/> Contributor address; City; State; Zip Code SUPERIOR, WI 54880-3919	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN KOONTZ, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHBINDER, HAYLEY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90042	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) HEALTHCARE ANALYST		Employer (See Instructions) LOS ANGELES COUNTY
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK, MARK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER/PHYSICIAN		Employer (See Instructions) NRF/CARENOW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 507/4629 Rpt: 510/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKALEW, TRINA <hr/> 6 Contributor address; City; State; Zip Code MERIDIAN, ID 83646	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKALEW, TRINA <hr/> Contributor address; City; State; Zip Code MERIDIAN, ID 83646	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKALEW, TRINA <hr/> Contributor address; City; State; Zip Code MERIDIAN, ID 83646	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKINGHAM-RAMIREZ, DESIREE ROSE <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKLES, CATHERINE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 508/4629 Rpt: 511/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKLEY, CHARLES <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKLEY, MARGARET <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKLEY, PATRICIA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKLEY, PATRICIA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKNER, JENE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 509/4629 Rpt: 512/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCKNER MEANS, CHANINN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77085	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HARRIS COUNTY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCY, JOY <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCY, JOY <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCY, MOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		Employer (See Instructions) TCSAAL
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCY, MOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		Employer (See Instructions) TCSAAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 510/4629 Rpt: 513/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCY, MOLLY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		9 Employer (See Instructions) TCSAAL
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCY, MOLLY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		Employer (See Instructions) TCSAAL
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUDD, RUSSELL	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BARON & BUDD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUDRONI, ANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759-2406		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUDRONI, ANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759-2406		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 511/4629 Rpt: 514/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUDRONI, ANNE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759-2406	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUECKERS, ARTHUR B <hr/> Contributor address; City; State; Zip Code COLD SPRING, MN 56320	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUELL, ROBERTA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUERGER, PAUL <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904-6114	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) FAMILY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUERGER, PAUL <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CARETAKER		Employer (See Instructions) FAMILY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 512/4629 Rpt: 515/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUERGER, PAUL <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76904-6114	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CAREGIVER		9 Employer (See Instructions) FAMILY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUERGER, PAUL <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) CARETAKER		Employer (See Instructions) FAMILY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUERGER, PAUL <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) CARETAKER		Employer (See Instructions) FAMILY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUFKIN, BUFKIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUGG, DAVID <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MECHANICAL ENGINEER		Employer (See Instructions) BP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 513/4629 Rpt: 516/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUGG, DAVID	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CYPRESS, TX 77429		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) BP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUHLER, LYNN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code BALTIMORE, MD 21201		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) TPAG
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUHRER, FRANK	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DANDELION CAFE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUITRON, ANDRES	Amount of Contribution (\$) \$39.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) FINANCIAL EXAMINER		Employer (See Instructions) FINRA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULA, NANCY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SHAVANO PARK, TX 78231-1542		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 514/4629 Rpt: 517/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULA, NANCY <hr/> 6 Contributor address; City; State; Zip Code SHAVANO PARK, TX 78231-1542	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULA PULECIO, DIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) COORDINATOR		Employer (See Instructions) LATINO VICTORY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULL, ANNE <hr/> Contributor address; City; State; Zip Code BETHANY BEACH, DE 19930	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLARD, ZACH <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLARD, ZACH <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 515/4629 Rpt: 518/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLICK, DONALD <hr/> 6 Contributor address; City; State; Zip Code PETALUMA, CA 94952	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLIS, PAYDEN <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CHARLES SCHWAB
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLIS, PAYDEN <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CHARLES SCHWAB
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLITT, DOROTHY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98102	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLOCK, DAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78763	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 516/4629 Rpt: 519/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLOCK, KARLA	7 Amount of Contribution (\$) \$20.24
	6 Contributor address; City; State; Zip Code WACO, TX 76712	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLOCK, LOIS	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77021	
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULLOCK, SHARLA	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78758	
Principal occupation / Job title (See Instructions) FINGERPRINT TECHNICIAN		Employer (See Instructions) CITY OF AUSTIN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULMAHN, LYNN	Amount of Contribution (\$) \$56.00
	Contributor address; City; State; Zip Code WACO, TX 76710	
Principal occupation / Job title (See Instructions) CASHIER		Employer (See Instructions) DRUG EMPORIUM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUNCH, RUDI	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77031	
Principal occupation / Job title (See Instructions) NIGHTCLUB OWNER		Employer (See Instructions) NUMBERS NIGHTCLUB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 517/4629 Rpt: 520/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUNCH, RUDI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77031	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NIGHTCLUB OWNER		9 Employer (See Instructions) NUMBERS NIGHTCLUB
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUNKER, LYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUNN, BENJAMIN <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92101	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BUNN LAW GROUP PC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUNTON, LUCIUS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, JULIA <hr/> Contributor address; City; State; Zip Code JONESBORO, GA 30238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 518/4629 Rpt: 521/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LINDA <hr/> 6 Contributor address; City; State; Zip Code FORT THOMAS, KY 41075	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 519/4629 Rpt: 522/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77070	7 Amount of Contribution (\$) \$15.25
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$42.13
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURCHETT, LYNDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDETT, LINDA <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) WBLT
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDETT, LINDA <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) WBLT

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 520/4629 Rpt: 523/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDICK, MARIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDS, MARGARET <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22102	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH ANALYST		Employer (See Instructions) HEALTH AND HUMAN SERVICES COMMISSION
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH ANALYST		Employer (See Instructions) HEALTH AND HUMAN SERVICES COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 521/4629 Rpt: 524/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78758		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUREK, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 522/4629 Rpt: 525/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGAN, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGE, DOROTHY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-2546	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGE, DOROTHY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-2546	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGER, SCOTT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) CLIMATE CONTROL
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, AARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 523/4629 Rpt: 526/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, ELAINE <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RSPS		9 Employer (See Instructions) COMMUNITIES FOR RECOVERY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, FRANCES <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, FRANCES <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$1.88
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BURGESS LAW PC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, LAURA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 524/4629 Rpt: 527/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, LAURA <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75040	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, MARILYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DISTRICT CLERK		Employer (See Instructions) HARRIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGETT, DEBORAH <hr/> Contributor address; City; State; Zip Code KINGMAN, AZ 86401	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGHDUFF, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) LONE STAR COLLEGE - CYFAIR
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGNER, EMILY <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22303	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 525/4629 Rpt: 528/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGNON, MICHAELA <hr/> 6 Contributor address; City; State; Zip Code ODENTON, MD 21113	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGUILLOS, LILY <hr/> Contributor address; City; State; Zip Code AVENTURA, FL 33180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) ATOM
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURK, DEBORAH <hr/> Contributor address; City; State; Zip Code PORT HADLOCK, WA 98339	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, BRIAN <hr/> Contributor address; City; State; Zip Code GREENWOOD VILLAGE, CO 80121	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) SBA LENDER		Employer (See Instructions) BYLINE BANK
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, CECELIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 526/4629 Rpt: 529/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, CECELIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, CECELIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, CECELIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, DEBORAH K. <hr/> Contributor address; City; State; Zip Code EL CAJON, CA 92019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, DEBORAH K. <hr/> Contributor address; City; State; Zip Code EL CAJON, CA 92019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 527/4629 Rpt: 530/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, DEBRA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77042	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) MEDICARE SALES		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, JOSEPH <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, KATHLEEN <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02420-3405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, KATHLEEN <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02420-3405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, KYLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGISLATIVE STAFF		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 528/4629 Rpt: 531/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, KYLE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LEGISLATIVE STAFF		9 Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, PATRICIA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, PATRICK <hr/> Contributor address; City; State; Zip Code MANHATTAN BEACH, CA 90266	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, REGAN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, TERRI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77001	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NONPROFIT EXECUTIVE		Employer (See Instructions) THE IMMUNIZATION PARTNERSHIP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 529/4629 Rpt: 532/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKE, TERRY <hr/> 6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKEEN, LAWRENCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77048	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) WAREHOUSE MANAGER		Employer (See Instructions) LEE'S SCREEN
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKES-JONES, TRINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77049	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		Employer (See Instructions) HARRIS COUNTY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKETT, SILVER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKHART, KATHRYN <hr/> Contributor address; City; State; Zip Code NEW HOLLAND, PA 17557	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 530/4629 Rpt: 533/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, DR. ROBIN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CLINICAL PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, DR. ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CLINICAL PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, DR. ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CLINICAL PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, KEN <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, KEN <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 531/4629 Rpt: 534/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURKS, PHILIP <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, VA 23235	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLAGE, RACHEL <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICY MANAGER		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS SYSTEM
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLAGE, RACHEL <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICY MANAGER		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS SYSTEM
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, CYNTHIA <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, CYNTHIA <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 532/4629 Rpt: 535/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code KEMPNER, TX 76539	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, CYNTHIA <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, CYNTHIA <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLESON, SANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STARTER		Employer (See Instructions) MTA
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLEY, CHANEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77093	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LCDC		Employer (See Instructions) CRR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 533/4629 Rpt: 536/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURLISON, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURMEISTER, MARTIN <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FLEX, LTD.
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNETT, MICHAEL <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95841	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNETT, PATRICIA <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84103	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNEY, FRANK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MARTIN & DROUGHT, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 534/4629 Rpt: 537/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNHAM, DENISA <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNHAM, PAMELA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNHAM, PAMELA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, BRIAN <hr/> Contributor address; City; State; Zip Code SEBASTIAN, FL 32958	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, CREOLA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULANT		Employer (See Instructions) AUSTIN POLICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 535/4629 Rpt: 538/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, JUDITH <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, KAYLYNN <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MACEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MACEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MACEY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$146.93
Principal occupation / Job title (See Instructions) HAIRSTYLIST		Employer (See Instructions) STYLING BY MACEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 536/4629 Rpt: 539/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MARY ANN <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BANKER		9 Employer (See Instructions) BB&T
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MARY ANN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) BB&T
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, PAUL <hr/> Contributor address; City; State; Zip Code SHEFFIELD, MA 01257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) INDEPENDENT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, PAUL <hr/> Contributor address; City; State; Zip Code SHEFFIELD, MA 01257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) INDEPENDENT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, ROBERT <hr/> Contributor address; City; State; Zip Code MELROSE, MA 02176	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 537/4629 Rpt: 540/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS-FERRO, ALLISON	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code ENNGLEWOOD, NJ 07631		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS-FERRO, ALLISON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ENNGLEWOOD, NJ 07631		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURR, ELIZABETH	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731-5715		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURR, LIZE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURR, LIZE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 538/4629 Rpt: 541/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURR, RICHARD	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LEGGETT, TX 77350		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) BURR & WELCH, PC
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURR, RICHARD	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LEGGETT, TX 77350		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BURR & WELCH, PC
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURRER, TRAVIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) HILL COUNTRY DESIGN BUILD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURRER, TRAVIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) HILL COUNTRY DESIGN BUILD
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURROWS, EMILY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NASHVILLE, TN 37206		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BASS, BERRY & SIMS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 539/4629 Rpt: 542/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURROWS, EMILY <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37206	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) BASS, BERRY & SIMS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURSTEIN, SAMUEL <hr/> Contributor address; City; State; Zip Code BELLEVILLE, IL 62221	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURT, JANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURTA, MICHELE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURTON, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MSR-1		Employer (See Instructions) TEXANS CREDIT UNION

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURTON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code CARY, NC 27511	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSBEE, WARREN <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) USAF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSBEE, WARREN <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) USAF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSBEE, WARREN <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) USAF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSCH, OLWEN <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32204	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 541/4629 Rpt: 544/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSCH, OLWEN <hr/> 6 Contributor address; City; State; Zip Code JACKSONVILLE, FL 32204-4651	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, HEATHER <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) THE LEVENBERG GROUP
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, JANIE R <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, JANIE R <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, JANIE R <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 542/4629 Rpt: 545/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19144	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) COOPER UNIVERSITY HEALTHCARE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, JENNIFER <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19144	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) COOPER UNIVERSITY HEALTHCARE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, LESLIE AND DON <hr/> Contributor address; City; State; Zip Code CHERRYFIELD, ME 04622	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, LISA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) AUSTIN ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTAMANTE, BRYON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) REVENUE MANAGER		Employer (See Instructions) CITY OF NRH

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 543/4629 Rpt: 546/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTAMANTE, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78705	7 Amount of Contribution (\$) \$10.54
8 Principal occupation / Job title (See Instructions) FOUNDER		9 Employer (See Instructions) TILLERXR
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTAMANTE, REBECA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTAMANTE, REBECA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTAMANTE, REBECA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTILLOS, EARLENE <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 544/4629 Rpt: 547/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTILLOS, EARLENE <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79423	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTILLOS, EARLENE <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTILLOS, JENNY <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTILLOS, TONY <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSTOS, CHRISTI <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASST. PUBLIC DEFENDER		Employer (See Instructions) DALLAS COUNTY

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 545/4629 Rpt: 548/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSWELL, HENRY <hr/> 6 Contributor address; City; State; Zip Code MELBOURNE, FL 32934	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) HPE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSWELL, HENRY <hr/> Contributor address; City; State; Zip Code MELBOURNE, FL 32934	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) HPE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTCHER, MICHELLE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTCHER, MICHELLE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTCHER, MICHELLE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, BERNARD (BERNIE)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code CHARLESTOWN, RI 02813	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, ELIZABETH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code WAYLAND, MA 01778	
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) THE MEDIATION GROUP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, JOHN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code RALEIGH, NC 27614	
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) JOHN BUTLER SALES, INC
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, JOHN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code RALEIGH, NC 27614	
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) JOHN BUTLER SALES, INC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, KATHY	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code LA VERNE, CA 91750	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 547/4629 Rpt: 550/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, KEVIN	7 Amount of Contribution (\$) \$26.00
6 Contributor address; City; State; Zip Code CHANDLER, TX 75758		
8 Principal occupation / Job title (See Instructions) INSURANCE		9 Employer (See Instructions) ISC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, KEVIN	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code CHANDLER, TX 75758		
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) ISC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, LESLEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75093		
Principal occupation / Job title (See Instructions) YOGA TEACHER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, LOIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KINNELON, NJ 07405		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, VICKIE	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 548/4629 Rpt: 551/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, VICKIE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code GRANBURY, TX 76049		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, VICKIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLER, VICKIE	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLIN, AUGUSTA	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code SEATTLE, WA 98105		
Principal occupation / Job title (See Instructions) BIZ+DEV		Employer (See Instructions) VALVE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTLIN, AUGUSTA	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code SEATTLE, WA 98105		
Principal occupation / Job title (See Instructions) BIZ+DEV		Employer (See Instructions) VALVE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 549/4629 Rpt: 552/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTT, MOIEN <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$4,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTTERWORTH, GUY <hr/> Contributor address; City; State; Zip Code CRANBURY, NJ 08512	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTUNGI NIWAGABA, LILLIAN <hr/> Contributor address; City; State; Zip Code ROSLYN HEIGHTS, NY 11577-1140	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) NYIT
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUXKEMPER, BRENNAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) FROST BANK
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUXKEMPER, BRENNAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) FROST BANK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 550/4629 Rpt: 553/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUXTON, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUYSE, BETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYARS, JERRY <hr/> Contributor address; City; State; Zip Code BYHALIA, MS 38611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MONITOR TECH		Employer (See Instructions) TELERHYTHMICS
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYARS, JERRY <hr/> Contributor address; City; State; Zip Code BYHALIA, MS 38611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MONITOR TECH		Employer (See Instructions) TELERHYTHMICS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYARS, JERRY <hr/> Contributor address; City; State; Zip Code BYHALIA, MS 38611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MONITOR TECH		Employer (See Instructions) TELERHYTHMICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 551/4629 Rpt: 554/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYAS, LAURA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CLINICAL DIRECTOR		9 Employer (See Instructions) BCBS NC
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYE, JANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYE, JANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, CONNOR <hr/> Contributor address; City; State; Zip Code WOODINVILLE, WA 98072	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) AP CLERK		Employer (See Instructions) MANSON CONSTRUCTION CO.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, CONNOR <hr/> Contributor address; City; State; Zip Code WOODINVILLE, WA 98072	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) AP CLERK		Employer (See Instructions) MANSON CONSTRUCTION CO.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 552/4629 Rpt: 555/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, DIANA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, ROBERT <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76097	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CITY OF FORT WORTH
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, ROBERT <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76097	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CITY OF FORT WORTH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYLECKIE, MATTHEW <hr/> Contributor address; City; State; Zip Code NOVATO, CA 94947	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARTNER ENABLEMENT MANAGER		Employer (See Instructions) INTERMEDIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 553/4629 Rpt: 556/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, ANITA <hr/> 6 Contributor address; City; State; Zip Code FT WASHINGTON, MD 20744	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EMERGENCY MGT		9 Employer (See Instructions) USDA
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, BRANDY <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76547	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, BRANDY <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76547	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) KASASA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, DEBORAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 554/4629 Rpt: 557/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, ERIC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78724	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		9 Employer (See Instructions) CITY OF AUSTIN DISTRICT 1
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PAMELA BYRD <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGALSHIELD ASSOCIATE		Employer (See Instructions) LEGALSHIELD
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PAMELA BYRD <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGALSHIELD ASSOCIATE		Employer (See Instructions) LEGALSHIELD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, RICHARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRNE, DARLENE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 555/4629 Rpt: 558/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRNE, KATHLEEN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77084		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRNE, SALLY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KAUFMAN, TX 75142		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYROM, JOHN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code IRVING, TX 75061		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRON, MICHELLE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11201		
Principal occupation / Job title (See Instructions) PROFESSIONAL ORGANIZER		Employer (See Instructions) SPACEGROOVE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BABCOCK, JANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EDMONDS, WA 98020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 556/4629 Rpt: 559/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BABCOCK, JANE <hr/> 6 Contributor address; City; State; Zip Code EDMONDS, WA 98020	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BABCOCK, JANE <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BABCOCK, JANE <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BARATTA, NICOLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) RED HAT INC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BURNS, DELIA <hr/> Contributor address; City; State; Zip Code PLEASANTON, CA 94566	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) UNITED NATIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 557/4629 Rpt: 560/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BURNS, DELIA <hr/> 6 Contributor address; City; State; Zip Code PLEASANTON, CA 94566	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) UNITED NATIONS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C CROLL, MADELEINE <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRADUATE ASSISTANT LECTURER		Employer (See Instructions) UNIVERSITY OF TEXAS - RIO GRANDE VALLEY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C LEE, ALICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) COMMISSIONER LESLEY BRIONES
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C THOMAS, PAMELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C TRIPLETT, DAVID <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL MANAGER		Employer (See Instructions) ENTERGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 558/4629 Rpt: 561/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C TRIPLETT, DAVID <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77382	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ENVIRONMENTAL MANAGER		9 Employer (See Instructions) ENTERGY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C., SHARON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) STATE OF TEXAS
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C., SHARON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) STATE OF TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABALLERO, RENE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) TOYOTA MOTOR MANUFACTURE TEXAS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABELL, JAMES <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 559/4629 Rpt: 562/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABELL, JAMES <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABLE, SARAH <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97239	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) S		Employer (See Instructions) S
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABRAL, MARIA ELENA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214-2721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) EMMA HOTEL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CABRERA, RICHARD <hr/> Contributor address; City; State; Zip Code FT LAUDERDALE, FL 33304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TAX PROFESSIONAL		Employer (See Instructions) BERKOWITZ POLLACK BRANT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CACCIATO, CAROLYN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 560/4629 Rpt: 563/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADE, JOANNA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75218		
8 Principal occupation / Job title (See Instructions) PRODUCER		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADE, JOANNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75218		
Principal occupation / Job title (See Instructions) PRODUCER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADE, RANDALL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381-3335		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADE, RANDALL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381-3335		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADENA, GILBERT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 561/4629 Rpt: 564/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADENA, LAURA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHIEF OF STAFF		9 Employer (See Instructions) CITY OF DALLAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADENHEAD, DONALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADMAN, SUSAN <hr/> Contributor address; City; State; Zip Code VISTA, CA 92084	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADUNZ, EDVIGE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10026	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADUNZ, EDVIGE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10026	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 562/4629 Rpt: 565/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CADY, DREW <hr/> 6 Contributor address; City; State; Zip Code DEL MAR, CA 92014	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FRMRARTSPRODUCER/RETIRED		9 Employer (See Instructions) PHILSOCIETYORANGECOUNTY,CA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAGLE, JUDY H <hr/> Contributor address; City; State; Zip Code WOODVILLE, TX 75979	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAHAN, LINDA <hr/> Contributor address; City; State; Zip Code KING CITY, OR 97224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL DESIGN		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAHAN, MICHAEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60654	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAHILL, JON <hr/> Contributor address; City; State; Zip Code SPOKANE, WA 99208	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) SAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 563/4629 Rpt: 566/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAI, JINLIANG <hr/> 6 Contributor address; City; State; Zip Code SHELBY COUNTY, TN 38018	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAI, JINLIANG <hr/> Contributor address; City; State; Zip Code GERMANTOWN, TN 38138	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, FRANCES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) FEDERATION OF STATE MEDICAL BOARDS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, FRANCES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) FEDERATION OF STATE MEDICAL BOARDS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, NANCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 564/4629 Rpt: 567/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, RACHELL <hr/> 6 Contributor address; City; State; Zip Code HYATTSVILLE, MD 20782	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TV		9 Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, SALLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) PRIVATETHERAPY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, SALLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) PRIVATETHERAPY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRO, DAVID <hr/> Contributor address; City; State; Zip Code BRIDGEWATER, NJ 08807	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDER, MARISA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONPROFIT ADMINISTRATOR		Employer (See Instructions) STUDENTS OF SERVICE (SOS)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 565/4629 Rpt: 568/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDER, MARISA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NONPROFIT ADMINISTRATOR		9 Employer (See Instructions) STUDENTS OF SERVICE (SOS)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, ROSEMARY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, ROSEMARY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, ROSEMARY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, ROSEMARY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 566/4629 Rpt: 569/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERON, SARA INES <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78715	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDERONE, ERIC <hr/> Contributor address; City; State; Zip Code QUEENS, NY 11421	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDWELL, CAROLE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MARKETING CONSULTANT		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALDWELL, ROBIN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, ASKALA HARRIS <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CONSULTANT & DIRECTOR		Employer (See Instructions) THE FOCUS GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 567/4629 Rpt: 570/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, DOMINIQUE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) CALHOUN MEREDITH
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, JOHN	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code JACKSON, MS 39201		
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) IMS ENGINEERS
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALHOUN, JOHN	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code JACKSON, MS 39201		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) IMS ENGINEERS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALKINS, CAROLYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAN, THOMAS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CASA GRANDE, AZ 85122		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 568/4629 Rpt: 571/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAWAY, TJ <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) AUDIO ENGINEER		9 Employer (See Instructions) TJ CALLAWAY AUDIO, INC.
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAWAY, TJ <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) AUDIO ENGINEER		Employer (See Instructions) TJ CALLAWAY AUDIO, INC.
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAWAY, TJ <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) AUDIO ENGINEER		Employer (See Instructions) TJ CALLAWAY AUDIO, INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLERY, NANCY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98122-3327	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLERY, NANCY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98122-3327	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 569/4629 Rpt: 572/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLERY, NANCY <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98122-3327	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLIER, HELEN <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) BRADLINK LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALOVINI, MARILOU <hr/> Contributor address; City; State; Zip Code NEW HYDE PARK, NY 11040	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER/TEACHER ASSISTANT		Employer (See Instructions) BCCS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, AMANDA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FELONY LEAD		Employer (See Instructions) HAYS COUNTY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, AMANDA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FELONYLEAD		Employer (See Instructions) HAYS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 570/4629 Rpt: 573/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, AMANDA <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FELONY LEAD		9 Employer (See Instructions) HAYS COUNTY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, AMANDA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FELONYLEAD		Employer (See Instructions) HAYS COUNTY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, ROGENE GEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) OUTREACH STRATEGISTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, TOMMY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78219	Amount of Contribution (\$) \$133.00
Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		Employer (See Instructions) BEXAR COUNTY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, TOMMY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78219	Amount of Contribution (\$) \$133.00
Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		Employer (See Instructions) BEXAR COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 571/4629 Rpt: 574/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, WINDY	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code RICHMOND, TX 77406		
8 Principal occupation / Job title (See Instructions) MENTAL HEALTH ADVOCATE		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALZADA, MARIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) METRO ID
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALZADA, MARIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) METRO ID
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMACHO, BRENDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMACHO, BRENDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 572/4629 Rpt: 575/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMACHO, PENNY <hr/> 6 Contributor address; City; State; Zip Code DEVINE, TX 78016	7 Amount of Contribution (\$) \$8.88
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMARA, FANTA <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) US DEPT OF VETERAN AFFAIRS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMARILLO, DESIRHEA <hr/> Contributor address; City; State; Zip Code LUCAS, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMARILLO, DESIRHEA <hr/> Contributor address; City; State; Zip Code LUCAS, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMERON, CATHERINE <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95125	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PART-TIME WITH NONPROFIT		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 573/4629 Rpt: 576/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMERON, LEE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMERON, LEE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMP, COLLEEN <hr/> Contributor address; City; State; Zip Code SAN RAFAEL, CA 94901-1760	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMP, DIXIE <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMP, MARGUERITE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 574/4629 Rpt: 577/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPAGNA, LARRY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) CHAMBERLAIN HRDLICKA
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPAIGN, DR. WEI FOR RRISD <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) SPAC		Employer (See Instructions) DR. WEI FOR RRISD
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPAIGN, JOHN BUCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78767	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPAIGN, MOLLY FOR TEXAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77266	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPAIGN, MOLLY FOR TEXAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77266	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 575/4629 Rpt: 578/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPAIGN ACCOUNT, JOSE GARZA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CAMPAIGN ACCOUNT		9 Employer (See Instructions) CAMPAIGN ACCOUNT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, AMANDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) RESEARCHER/THERAPIST		Employer (See Instructions) UT SOUTHWESTERN
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, AMANDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) RESEARCHER/THERAPIST		Employer (See Instructions) UT SOUTHWESTERN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, AUBREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77014	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, BRUCE <hr/> Contributor address; City; State; Zip Code SYLMAR, CA 91342	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BUILDING INSPECTOR		Employer (See Instructions) CITY OF LOS ANGELES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 576/4629 Rpt: 579/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, BRUCE <hr/> 6 Contributor address; City; State; Zip Code SYLMAR, CA 91342	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) BUILDING INSPECTOR		9 Employer (See Instructions) CITY OF LOS ANGELES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, CASSANDRA <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) DIASORIN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, CHARLOTTE <hr/> Contributor address; City; State; Zip Code GOLDSBORO, NC 27534	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, CHARLOTTE <hr/> Contributor address; City; State; Zip Code GOLDSBORO, NC 27534	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, DARRELL <hr/> Contributor address; City; State; Zip Code YANTIS, TX 75497	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 577/4629 Rpt: 580/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, DARRELL <hr/> 6 Contributor address; City; State; Zip Code YANTIS, TX 75497	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, DARRELL <hr/> Contributor address; City; State; Zip Code YANTIS, TX 75497	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, DARRELL <hr/> Contributor address; City; State; Zip Code YANTIS, TX 75497	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, DEMI <hr/> Contributor address; City; State; Zip Code FRENO, TX 77545	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYSTS		Employer (See Instructions) ELEVANCE HEALTH
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, ELAINE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NATIONAL ORGANIZER		Employer (See Instructions) PLANNED PARENTHOOD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 578/4629 Rpt: 581/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, ELAINE <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NATIONAL ORGANIZER		9 Employer (See Instructions) PLANNED PARENTHOOD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, ELIZABETH J <hr/> Contributor address; City; State; Zip Code BIG SPRING, TX 79721	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, ELIZABETH J <hr/> Contributor address; City; State; Zip Code BIG SPRING, TX 79721	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, GERALD RAY <hr/> Contributor address; City; State; Zip Code MADISON, WI 53705	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, HUGH <hr/> Contributor address; City; State; Zip Code HAVRE DE GRACE, MD 21078	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 579/4629 Rpt: 582/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, JEFFREY <hr/> 6 Contributor address; City; State; Zip Code FRESNO, TX 77545	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, JOHN <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED FEDERAL EMPLOYEE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, LATISHA <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, TX 75457	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) COMO-PICKTON ISD
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, LATISHA <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, TX 75457	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) COMO-PICKTON ISD
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, LEANNE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 580/4629 Rpt: 583/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, MARILYN <hr/> 6 Contributor address; City; State; Zip Code LAKE FOREST PARK CI, WA 98155	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, MARILYN <hr/> Contributor address; City; State; Zip Code LAKE FOREST PARK CI, WA 98155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, MARY BAINE <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, NICCI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT DISTRICT ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, NICCI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT DISTRICT ATTORNEY		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 581/4629 Rpt: 584/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, SANDRA <hr/> 6 Contributor address; City; State; Zip Code PORT CLINTON, OH 43452	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPION, TEE <hr/> Contributor address; City; State; Zip Code HIGHBRIDGE, WI 54846	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOLO, ALLISON <hr/> Contributor address; City; State; Zip Code STILLWATER, OK 74074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCH ASSISTANT		Employer (See Instructions) OKLAHOMA STATE UNIVERSITY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOLO, ALLISON <hr/> Contributor address; City; State; Zip Code STILLWATER, OK 74074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCH ASSISTANT		Employer (See Instructions) OKLAHOMA STATE UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS, ARIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77249	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		Employer (See Instructions) TEXAS SENATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 582/4629 Rpt: 585/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS, ARIANA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77249	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		9 Employer (See Instructions) TEXAS SENATE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SELF-EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS, FIDEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS, LORENA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PUBLIC AFFAIRS CONSULTANT		Employer (See Instructions) CAMPOS CONSULTING GROUP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPOS, LUI <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70810	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 583/4629 Rpt: 586/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPUZANO, SOL-ANGEL <hr/> 6 Contributor address; City; State; Zip Code SYLMAR, CA 91342	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPUZANO, SOL-ANGEL <hr/> Contributor address; City; State; Zip Code SYLMAR, CA 91342	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANADA, JENNIFER <hr/> Contributor address; City; State; Zip Code CARY, NC 27513	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANAHUATI, JUDY <hr/> Contributor address; City; State; Zip Code COLUMBIA, MD 21045	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL ADVISOR		Employer (See Instructions) USAID
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANAHUATI, JUDY <hr/> Contributor address; City; State; Zip Code COLUMBIA, MD 21045	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL ADVISOR		Employer (See Instructions) USAID

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 584/4629 Rpt: 587/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, BARBARA <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, BARBARA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, BARBARA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, LIZ <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, LIZ <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 585/4629 Rpt: 588/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, YOLANDA <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANALES, YOLANDA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANAS, ANTONIO <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDELARIA, KATHY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDELARIA, KATHY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 586/4629 Rpt: 589/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDELARIA, KATHY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDELARIA, KATHY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDIDI, CAROLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WILLIAMSTOWN, NJ 08094		
Principal occupation / Job title (See Instructions) LEARNING DISABILITIES TEACHER-CONSULTANT		Employer (See Instructions) INDEPENDENT CONTRACTOR
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDIDI, CAROLE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WILLIAMSTOWN, NJ 08094		
Principal occupation / Job title (See Instructions) LEARNING DISABILITIES TEACHER-CONSULTANT		Employer (See Instructions) INDEPENDENT CONTRACTOR
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDIDI, CAROLE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WILLIAMSTOWN, NJ 08094		
Principal occupation / Job title (See Instructions) LEARNING DISABILITIES TEACHER-CONSULTANT		Employer (See Instructions) INDEPENDENT CONTRACTOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 587/4629 Rpt: 590/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDLER, CHARLES <hr/> 6 Contributor address; City; State; Zip Code ROANOKE, TX 76262	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) INSURANCE AGENT		9 Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANDLER, CHARLES <hr/> Contributor address; City; State; Zip Code ROANOKE, TX 76262	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANNON, LAURA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANNON, LAURA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANO, DOMINGA <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78541	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 588/4629 Rpt: 591/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANO, KATHERINE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANO, KATHERINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTINE, RICHARD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code RANCHO PALOS VERDES, CA 90275		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTOR, MIRIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTOR, MIRIAM	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 589/4629 Rpt: 592/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTRELL, PIERCE E	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code COLLEGE STA, TX 77845-7722		
8 Principal occupation / Job title (See Instructions) UNIVERSITY FACULTY		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTRELL, PIERCE E	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code COLLEGE STA, TX 77845-7722		
Principal occupation / Job title (See Instructions) UNIVERSITY FACULTY		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, JENNIFER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) ECI
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) ECI
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, JENNIFER	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) ECI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 590/4629 Rpt: 593/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, JOSIE <hr/> 6 Contributor address; City; State; Zip Code MCALLEN, TX 78501	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, SAMUEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU, SAMUEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU-WILSON, DR. MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LEADERSHIP CONSULTANT		Employer (See Instructions) MARQUEE CONSULTING
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU-WILSON, DR. MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LEADERSHIP CONSULTANT		Employer (See Instructions) MARQUEE CONSULTING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 591/4629 Rpt: 594/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANTU-WILSON, DR. MICHELLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77089	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LEADERSHIP CONSULTANT		9 Employer (See Instructions) MARQUEE CONSULTING
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAO, CHENG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731-2437	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) HCL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPE, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) LEGAL		Employer (See Instructions) STATE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPEHART, GEORGE <hr/> Contributor address; City; State; Zip Code GASTONIA, NC 28054	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPEHART, GEORGE <hr/> Contributor address; City; State; Zip Code GASTONIA, NC 28054	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 592/4629 Rpt: 595/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPELL, DAVID <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90067	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPISTRAN, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) CAPLO ADVISORY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPO, ZEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EDUCATION/LABOR		Employer (See Instructions) TEXAS AFT
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPO, ZEPH <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) TEXAS AFT
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPORALE, LYNN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BIOCHEMIST		Employer (See Instructions) ST; JOHN'S UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 593/4629 Rpt: 596/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPOZZOLI, JOHN <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPOZZOLI, JOHN <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAPP, SUE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMPLIANCE ADVISOR		Employer (See Instructions) CAPITAL ONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAFIOL, ROBYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) ROBINSON CLAY INC.
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAFIOL, ROBYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) ROBINSON CLAY INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 594/4629 Rpt: 597/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAFIOL, ROBYN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75244	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		9 Employer (See Instructions) ROBINSON CLAY INC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAFIOL, ROBYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) ROBINSON CLAY INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARATTI, HANNAH <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95407	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARATTI, HANNAH <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARATTI, HANNAH <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 595/4629 Rpt: 598/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARATTI, HANNAH <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA, CA 95407	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) THERAPIST		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARATTI, HANNAH <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95407	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAWAY, BEA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAWAY, BEA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) TRINITY UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAWAY, BEA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 596/4629 Rpt: 599/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARAWAY, BEA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) TRINITY UNIVERSITY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARDELL, JUDITH <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARDENAS, BETO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CHAIRMAN		Employer (See Instructions) BC GLOBAL LP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY, PATRICIA <hr/> Contributor address; City; State; Zip Code CHARTER TWP OF CLINTON, MI 48038	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY, PATRICIA <hr/> Contributor address; City; State; Zip Code CHARTER TWP OF CLINTON, MI 48038	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 597/4629 Rpt: 600/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code CHARTER TWP OF CLINTON, MI 48038	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY, PATRICIA <hr/> Contributor address; City; State; Zip Code CHARTER TWP OF CLINTON, MI 48038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY-BAY, ERMA <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY-BAY, ERMA <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY-BAY, ERMA <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 598/4629 Rpt: 601/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARL, CARLTON <hr/> 6 Contributor address; City; State; Zip Code MARTINDALE, TX 78655	7 Amount of Contribution (\$) \$1,250.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE AND CONSULTIN		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLETON, C ELAINE <hr/> Contributor address; City; State; Zip Code DENVER, CO 80238	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER / RANCHER		Employer (See Instructions) CARLETON GOTLIN LAW PC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLETON, CONNIE <hr/> Contributor address; City; State; Zip Code BENTONVILLE, AR 72712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLEY, ANNE <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ANNE CARLEY CREATIVE LLC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLIN, AMY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002-2069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE CARLIN LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 599/4629 Rpt: 602/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLIN, AMY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77002-2069	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) THE CARLIN LAW FIRM
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLIN, BARBARA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLIN, BARBARA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLISLE, SALLIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PRISM HEALTH NORTH TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 600/4629 Rpt: 603/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLOCK, DAVID <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77027	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) MACHETE GROUP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLS, KATHERINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, CAROL <hr/> Contributor address; City; State; Zip Code MT JEWETT, PA 16740	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PRIEST		Employer (See Instructions) EPISCOPAL CHURCH
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, CAROL <hr/> Contributor address; City; State; Zip Code MT JEWETT, PA 16740	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PRIEST		Employer (See Instructions) EPISCOPAL CHURCH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) U.S. HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 601/4629 Rpt: 604/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75060	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, GERALD <hr/> Contributor address; City; State; Zip Code AITKIN, MN 56431	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, KARAN <hr/> Contributor address; City; State; Zip Code BRIDGMAN, MI 49106	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 602/4629 Rpt: 605/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLSON, LILLIAN <hr/> 6 Contributor address; City; State; Zip Code ALAMO, TX 78516	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARLTON, CLAUDIA <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28270	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) PPD, INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMENATY, MAGALI <hr/> Contributor address; City; State; Zip Code WINDERMERE, FL 34786	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMENATY, MAGALI <hr/> Contributor address; City; State; Zip Code WINDERMERE, FL 34786	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMENATY, MAGALI <hr/> Contributor address; City; State; Zip Code WINDERMERE, FL 34786	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 603/4629 Rpt: 606/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMICHAEL, HAROLD <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75226	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ART DIRECTOR		9 Employer (See Instructions) TPN
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMICHAEL, HAROLD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75226	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) ART DIRECTOR		Employer (See Instructions) TPN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMICHAEL, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMICHAEL, PHILIP <hr/> Contributor address; City; State; Zip Code NYACK, NY 10960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMICHAEL, PHILIP <hr/> Contributor address; City; State; Zip Code NYACK, NY 10960	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 604/4629 Rpt: 607/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMICHAEL, WALTA <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77375	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMODY, CATHERINE <hr/> Contributor address; City; State; Zip Code MIAMI BEACH, FL 33139	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARMODY, CATHERINE <hr/> Contributor address; City; State; Zip Code MIAMI BEACH, FL 33139	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, BILLY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, BILLY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 605/4629 Rpt: 608/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, DELORIS <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, DELORIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, PEGGY <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, PEGGY <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SCIENCE EDUCATOR		Employer (See Instructions) OUR LADY OF THE LAKE UNI
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNAHAN, PEGGY <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SCIENCE EDUCATOR		Employer (See Instructions) OUR LADY OF THE LAKE UNI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 606/4629 Rpt: 609/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, FRANCES	7 Amount of Contribution (\$) \$120.00
6 Contributor address; City; State; Zip Code HAZELWOOD, MO 63042		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, MARILYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WESTFIELD, MA 01085		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, MARILYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WESTFIELD, MA 01085		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, MARILYN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WESTFIELD, MA 01085		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, MARILYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WESTFIELD, MA 01085		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 607/4629 Rpt: 610/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, MARILYN <hr/> 6 Contributor address; City; State; Zip Code WESTFIELD, MA 01085	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNIE, TWYLA <hr/> Contributor address; City; State; Zip Code HOMEWOOD, IL 60430	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TSA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAROL ODONNELL, 550 OBSERVER HWY <hr/> Contributor address; City; State; Zip Code HOBOKEN, NJ 07030	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAROL ODONNELL, 550 OBSERVER HWY <hr/> Contributor address; City; State; Zip Code HOBOKEN, NJ 07030	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAROZZA, JILL <hr/> Contributor address; City; State; Zip Code MADISON, WI 53717	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FRONT DESK ASSISTANT		Employer (See Instructions) J.H. FINDORFF & SON, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 608/4629 Rpt: 611/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAROZZA, JILL <hr/> 6 Contributor address; City; State; Zip Code MADISON, WI 53717	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) FRONT DESK ASSISTANT		9 Employer (See Instructions) J.H. FINDORFF & SON, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, CATHERINE <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, KEVIN <hr/> Contributor address; City; State; Zip Code FORT WAYNE, IN 46807-2848	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) FIELD SERVICE ENGINEER		Employer (See Instructions) TESTEX
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, WILLIAM <hr/> Contributor address; City; State; Zip Code LA JOLLA, CA 92037	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LA MESA SPRING VALLEY SCHOOLS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPIO, JESUS <hr/> Contributor address; City; State; Zip Code BAKERSFIELD, CA 93313	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 609/4629 Rpt: 612/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code ANACORTES, WA 98221	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, DARIAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MECHANICAL ENGINEER		Employer (See Instructions) CASI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, DARIAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MECHANICAL ENGINEER		Employer (See Instructions) CASI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, DEBBIE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, DIANE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94131	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE PRACTITIONER		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, JOHN <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98101	7 Amount of Contribution (\$) \$47.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, ROBERT <hr/> Contributor address; City; State; Zip Code MONTEREY PARK, CA 91754-3839	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARR, SUSAN <hr/> Contributor address; City; State; Zip Code HOCKESSIN, DE 19707	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SILVANA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SERVER		Employer (See Instructions) UNION SQUARE EVENTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 611/4629 Rpt: 614/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		9 Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 612/4629 Rpt: 615/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$95.00
8 Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		9 Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 613/4629 Rpt: 616/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		9 Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 614/4629 Rpt: 617/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		9 Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRANZA, SUSANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) MAKEL ENGINEERING, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRARA, MARY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 615/4629 Rpt: 618/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRASCO, ARCILIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRASCO, HANNAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75216		
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) TXDOT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRELL, FREDERICK D.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SYCAMORE, IL 60178		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRELL, THERESA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75067		
Principal occupation / Job title (See Instructions) PIANO TEACHER		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRELL, THERESA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75067		
Principal occupation / Job title (See Instructions) PIANO TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 616/4629 Rpt: 619/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARREON, PAT <hr/> 6 Contributor address; City; State; Zip Code ELGIN, IL 60123	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARREON, PAT <hr/> Contributor address; City; State; Zip Code ELGIN, IL 60123	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIER, MELODY <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CARRIER & ALLISON LAW GROUP, P.C.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIER, MELODY <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CARRIER & ALLISON LAW GROUP, P.C.
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIER, MICKI <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 617/4629 Rpt: 620/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIER, MICKI <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97219	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 618/4629 Rpt: 621/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRIKER, KATHY D <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, ANDREW <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381-2809	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) ORACLE CORP
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, ANDREW <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381-2809	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) ORACLE CORP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 619/4629 Rpt: 622/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78702	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, JAIME <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363-4313	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) KLEBERG COUNTY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, JAIME <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363-4313	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) KLEBERG COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, JENNIFER <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) YAP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, SHANIA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 620/4629 Rpt: 623/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, VALERIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059-5900	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, VERONICA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) UTEP
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRILLO, VERONICA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) UTEP
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, ANGEL <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ADVOCACY		Employer (See Instructions) MEASURE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, ANGEL <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 621/4629 Rpt: 624/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77021	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) APPLICATION ANALYST		9 Employer (See Instructions) PROVIDENCE
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, KEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CARRINGTON COLEMAN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, LYNN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) NEW DOMINION ENTERPRISES
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, ROSE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, ROSE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 622/4629 Rpt: 625/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, VAL <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33155	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 623/4629 Rpt: 626/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARRUBA, ANNE	7 Amount of Contribution (\$) \$15.25
6 Contributor address; City; State; Zip Code CYPRESS, TX 77429		
8 Principal occupation / Job title (See Instructions) VOLUNTEER COORDINATOR		9 Employer (See Instructions) CY-HOPE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, CONNIE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code WELLINGTON, KS 67152		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, KATHLEEN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code DALLAS, TX 75355		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, KATHLEEN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code DALLAS, TX 75355		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, SHAE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CAMDEN, AR 71701-5505		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 624/4629 Rpt: 627/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, SHAE <hr/> 6 Contributor address; City; State; Zip Code CAMDEN, AR 71701-5505	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, SHAE <hr/> Contributor address; City; State; Zip Code CAMDEN, AR 71701-5505	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, SHAE <hr/> Contributor address; City; State; Zip Code CAMDEN, AR 71701-5505	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSRUD, ALAN <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSRUD, ALAN <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 625/4629 Rpt: 628/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSRUD, ALAN <hr/> 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSRUD, ALAN <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSRUD, ALAN <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, ALTHEA <hr/> Contributor address; City; State; Zip Code MILPITAS, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, ALTHEA <hr/> Contributor address; City; State; Zip Code MILPITAS, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 626/4629 Rpt: 629/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, BERNARD <hr/> 6 Contributor address; City; State; Zip Code FRANKLINVILLE, NJ 08322	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) BKC
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, DARRYL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, DARRYL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, E. LEON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287-7528	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CARTER ARNETT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, ERIC <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 627/4629 Rpt: 630/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, FREDERICK <hr/> 6 Contributor address; City; State; Zip Code SICKLERVILLE, NJ 08081	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, JOHN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 628/4629 Rpt: 631/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, KYLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, LORETHA <hr/> Contributor address; City; State; Zip Code CLINTON, NC 28328	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, LYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, LYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, MELISSA <hr/> Contributor address; City; State; Zip Code HARTSDALE, NY 10530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 629/4629 Rpt: 632/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, MELISSA <hr/> 6 Contributor address; City; State; Zip Code HARTSDALE, NY 10530	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, RANDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, RANDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, RANDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, SHELLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 630/4629 Rpt: 633/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, SUZANNE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code NRH, TX 76182		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, SUZANNE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NRH, TX 76182		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, TAMEIKA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, TAWASKI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SACHSE, TX 75048		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF-EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, WILLETHA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ST PAUL, MN 55103		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SANKOFA LEADERSHIP NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 631/4629 Rpt: 634/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, WILLETHA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ST PAUL, MN 55103		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SANKOFA LEADERSHIP NETWORK
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTIN, CHERYL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FOLSOM, CA 95630		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTWRIGHT, BETTIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTWRIGHT, DORSEY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTWRIGHT, MARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704-2807		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 632/4629 Rpt: 635/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTWRIGHT, MARY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704-2807	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTWRIGHT, THERESE <hr/> Contributor address; City; State; Zip Code KLAMATH FALLS, OR 97601	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARVAJAL, CAROLINA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARVAJAL, CAROLINA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASALTA, LORRIE <hr/> Contributor address; City; State; Zip Code RENO, NV 89502	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESCHOOL TEACHER		Employer (See Instructions) LITTLE BEAR PRESCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 633/4629 Rpt: 636/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASANAVE, PETER <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11215	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAR, GREGORIO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONGRESSMAN		Employer (See Instructions) UNITED STATES
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAS, NANCY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO COUNTY'S OFFICERS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAS, NANCY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO COUNTY'S OFFICERS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, CATHERINE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) FREEMAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 634/4629 Rpt: 637/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075-4009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) FREEMAN
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, CATHERINE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) FREEMAN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, MICHAEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) JPMORGAN & CHASE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, MICHAEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) JPMORGAN & CHASE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, MICHAEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SENIOR PRODUCT MANAGER		Employer (See Instructions) JPMORGAN & CHASE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 635/4629 Rpt: 638/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075-4009	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SENIOR PRODUCT MANAGER		9 Employer (See Instructions) JPMORGAN & CHASE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, MICHAEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SENIOR PRODUCT MANAGER		Employer (See Instructions) JPMORGAN & CHASE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASAVANT, MICHAEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-4009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SENIOR PRODUCT MANAGER		Employer (See Instructions) JPMORGAN & CHASE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASBEER, ERNIE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASBEER, ERNIE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 636/4629 Rpt: 639/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASBEER, ERNIE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, BERGAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS/ORGANIZATION MGT CONSULTANT		Employer (See Instructions) CASEY COMMUNICATIONS, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, KATHLEEN <hr/> Contributor address; City; State; Zip Code NESQUEHONING, PA 18240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, LAURIE <hr/> Contributor address; City; State; Zip Code OAK PARK, IL 60302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) LAURIE CASEY
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, LAURIE <hr/> Contributor address; City; State; Zip Code OAK PARK, IL 60302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) LAURIE CASEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 637/4629 Rpt: 640/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASH, THOMAS <hr/> 6 Contributor address; City; State; Zip Code ASHEVILLE, NC 28801	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASIANO, JAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) EVENTS MANAGER		Employer (See Instructions) HARRIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASILLAS, VIRGINIA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPARIS, TERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPARIS, TERRY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 638/4629 Rpt: 641/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPARIS, TERRY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78736	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPARIS, TERRY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPERSSON, VICKI <hr/> Contributor address; City; State; Zip Code VICTOR, NY 14564	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRAPHICS		Employer (See Instructions) WESTSIDE NEWS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASPERSSON, VICKI <hr/> Contributor address; City; State; Zip Code VICTOR, NY 14564	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRAPHICS		Employer (See Instructions) WESTSIDE NEWS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSEDAY, JOHN <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 639/4629 Rpt: 642/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSEDAY, JOHN <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98103	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSEL, ROBIN <hr/> Contributor address; City; State; Zip Code ARLINGTON, MA 02476	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSIDY, CINDY & JOHN <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSIDY, CYNTHIA <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSON, RICHARD <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 640/4629 Rpt: 643/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSON, RICHARD <hr/> 6 Contributor address; City; State; Zip Code GOLDEN, CO 80403	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSON, RICHARD <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSON, RICHARD <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSON, RICHARD <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSON, RICHARD <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 641/4629 Rpt: 644/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASSTEVENS, CINDY <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, CARLOS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, RICARDO <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLASISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, RICARDO <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLASISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, RODOLFO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77088	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 642/4629 Rpt: 645/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, SANTIAGO <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77339	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) OMEGA ENGINEERS, INC.
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA, SANTIAGO <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) OMEGA ENGINEERS, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA JR, TRISTAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) GOVERNMENT RELATIONS		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANEDA JR, TRISTAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) GOVERNMENT RELATIONS		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTANO, MARIE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) FOOD DELIVERY		Employer (See Instructions) HEB FAVOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 643/4629 Rpt: 646/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTEEL, JESSICA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035-5043		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) SAN JACINTO COMMUNITY COLLEGE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTELINO, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOCA RATON, FL 33433		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTELINO, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOCA RATON, FL 33433		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTELINO, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOCA RATON, FL 33433		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTELINO, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOCA RATON, FL 33433		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 644/4629 Rpt: 647/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTELINO, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code BOCA RATON, FL 33433	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTELLANOS, JOHN <hr/> Contributor address; City; State; Zip Code ALHAMBRA, CA 91803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) UNUM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTERTON, WENDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOLUTION CONSULTANT		Employer (See Instructions) HIGHSPOT
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, ALEXIS <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JAMES REY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, ALYCIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADVOCATE		Employer (See Instructions) TEXAS CIVIL RIGHTS PROJECT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 645/4629 Rpt: 648/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, CHRIS <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CHILD SUPPORT TECH II		9 Employer (See Instructions) ATTORNEY GENERAL OF TEXAS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, CHRIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FARMERS INS AGENT		Employer (See Instructions) AGENCY PRODUCER
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, CHRIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHILD SUPPORT TECH II		Employer (See Instructions) ATTORNEY GENERAL OF TEXAS
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, CHRIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CHILD SUPPORT TECH II		Employer (See Instructions) ATTORNEY GENERAL OF TEXAS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, CHRIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FARMERS INS AGENT		Employer (See Instructions) AGENCY PRODUCER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 646/4629 Rpt: 649/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, CHRIS <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78221	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHILD SUPPORT TECH II		9 Employer (See Instructions) ATTORNEY GENERAL OF TEXAS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, GENA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216-7888	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TAX		Employer (See Instructions) RETAIL
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, MICHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADVOCACY		Employer (See Instructions) CDF-TEXAS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, PAUL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAMBDA LEGAL
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, SHELBY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$14.60
Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		Employer (See Instructions) STRONG STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 647/4629 Rpt: 650/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTILLO, SHELBY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$14.60
8 Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		9 Employer (See Instructions) STRONG STRATEGIES
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTLE, REX <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79411	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TYLER TECHNOLOGIES
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTLE, REX <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79411	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TYLER TECHNOLOGIES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTLEBERRY, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SIGN LANGUAGE INTERPRETER		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTLEBERRY, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SIGN LANGUAGE INTERPRETER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 648/4629 Rpt: 651/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTRO, ART	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77355		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASTRO, NANCY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HARLINGEN, TX 78553		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HARLINGEN CISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASWELL, WAYNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FULSHEAR, TX 77441		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATALA, PIERRE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77842		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATALANOTTO, MARY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code GREENVILLE, SC 29605		
Principal occupation / Job title (See Instructions) PSYCHOTHERA;Y		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 649/4629 Rpt: 652/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATALANOTTO, MARY <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, SC 29605	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERA;Y		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATALANOTTO, MARY <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERA;Y		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATES, NUEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) DAILY COMMERCIAL RECORD
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATES, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATES, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 650/4629 Rpt: 653/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
8 Principal occupation / Job title (See Instructions) COSMETOLOGIST		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 651/4629 Rpt: 654/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
8 Principal occupation / Job title (See Instructions) COSMETOLOGIST		9 Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CATTEN, KIT	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84129		
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 652/4629 Rpt: 655/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUCHI, RICHARD <hr/> 6 Contributor address; City; State; Zip Code WHEAT RIDGE, CO 80033	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAULK, KAREN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAULK, KAREN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023-1117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUWENBERGH, KEITH <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUWENBERGH, KEITH <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 653/4629 Rpt: 656/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUWENBERGH, KEITH <hr/> 6 Contributor address; City; State; Zip Code GREEN BAY, WI 54313	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUWENBERGH, KEITH <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUWENBERGH, KEITH <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUWENBERGH, KEITH <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54313	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANAGH, ANNETTE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30329	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 654/4629 Rpt: 657/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANAGH, ANNETTE <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30329	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANAGH, KAREN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) FRIENDS FOR LIFE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANAUGH, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANAUGH, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANAUGH, RICHARD <hr/> Contributor address; City; State; Zip Code CHARLESTON, IL 61920	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 655/4629 Rpt: 658/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVAZOS, LETI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRODUCT ANALYST		9 Employer (See Instructions) LIVANOVA
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVAZOS, LETI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT ANALYST		Employer (See Instructions) LIVANOVA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVAZOS, SERGIO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GREENBERG TRAURIG, LLP
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVAZOS, SYLVIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009-2755	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) SELF-EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVENDER, CATRIONA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HORNBERGER FULLER & GARZA INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 656/4629 Rpt: 659/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVENDER, CATRIONA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HORNBERGER FULLER & GARZA INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVENDER, NICOLE <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) PERSONAL SHOPPER		Employer (See Instructions) HEB
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVENDER, RICHARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) AUTO DEALER		Employer (See Instructions) CAVENDER AUTO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAYTON, MALINDA <hr/> Contributor address; City; State; Zip Code APEX, NC 27539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAYTON, MALINDA <hr/> Contributor address; City; State; Zip Code APEX, NC 27539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 657/4629 Rpt: 660/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAYTON, MALINDA <hr/> 6 Contributor address; City; State; Zip Code APEX, NC 27539	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAYTON, MALINDA <hr/> Contributor address; City; State; Zip Code APEX, NC 27539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAYTON, MALINDA <hr/> Contributor address; City; State; Zip Code APEX, NC 27539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAZABON, MICHAEL <hr/> Contributor address; City; State; Zip Code HEATH, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAZABON, MICHAEL <hr/> Contributor address; City; State; Zip Code HEATH, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 658/4629 Rpt: 661/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAZARES, GABE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77011	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NONPROFIT MANAGEMENT		9 Employer (See Instructions) LINK HOUSTON
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAZARES, GABE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NONPROFIT MANAGEMENT		Employer (See Instructions) LINK HOUSTON
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAZARES, GABE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONPROFIT MANAGEMENT		Employer (See Instructions) LINK HOUSTON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CECIL, MARSHA <hr/> Contributor address; City; State; Zip Code CHICO, CA 95928	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CECILIO, MARIA BENEDITA <hr/> Contributor address; City; State; Zip Code SANTA CLARITA, CA 91387	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TAX PREPARER		Employer (See Instructions) H&R BLOCK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 659/4629 Rpt: 662/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CECILIO, MARIA BENEDITA <hr/> 6 Contributor address; City; State; Zip Code SANTA CLARITA, CA 91387	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TAX PREPARER		9 Employer (See Instructions) H&R BLOCK
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEDERBLOM, ADAM <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) CIVIL SERVANT		Employer (See Instructions) FRANCHISE TAX BOARD
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEDERBLOM, ADAM <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) CIVIL SERVANT		Employer (See Instructions) FRANCHISE TAX BOARD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CELIA, JULIE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94608	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) GOFUNDME
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CELL, SABRINA <hr/> Contributor address; City; State; Zip Code MASSAPEQUA, NY 11758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 660/4629 Rpt: 663/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEMO, JASON <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CEMO, JASON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERISANO, MICHELE <hr/> Contributor address; City; State; Zip Code FREEHOLD, NJ 07728	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERISANO, MICHELE <hr/> Contributor address; City; State; Zip Code FREEHOLD, NJ 07728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERVANTES, CORINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) INVESTIGATOR		Employer (See Instructions) EP COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 661/4629 Rpt: 664/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CESARATO, GERALD <hr/> 6 Contributor address; City; State; Zip Code GRAND BLANC, MI 48439	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ANALYSIST		9 Employer (See Instructions) INTERNAL REVENUE SERVICE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CESPEDES, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CESSNA, BETH <hr/> Contributor address; City; State; Zip Code ASHEVILLE, NC 28804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MARS HILL UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CESSNA, BETH <hr/> Contributor address; City; State; Zip Code ASHEVILLE, NC 28804	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) MARS HILL UNIVERSITY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CETERA, MICHAEL <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 662/4629 Rpt: 665/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CETERA, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75036	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CETINA, CHARLES <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) FREELANCE ORGANIZER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHABAK-CLAGETT, PAMELA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHACIN, JUAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGN ARCHITECT		Employer (See Instructions) MUNOZ ALBIN
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHACON, ENMARIA <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 663/4629 Rpt: 666/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHACON, ENMARIA <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHADHA, HARPARMINDER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHADHA, TINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHADHA, TINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHADWICK, RVA <hr/> Contributor address; City; State; Zip Code CARTHAGE, TX 75633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIR		Employer (See Instructions) CARTHAGE INDEPENDENT SCHOOL DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 664/4629 Rpt: 667/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHADWICK, RVA <hr/> 6 Contributor address; City; State; Zip Code CARTHAGE, TX 75633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATIR		9 Employer (See Instructions) CARTHAGE INDEPENDENT SCHOOL DISTRICT
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHADWICK, RVA <hr/> Contributor address; City; State; Zip Code CARTHAGE, TX 75633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIR		Employer (See Instructions) CARTHAGE INDEPENDENT SCHOOL DISTRICT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAFFEE, DIANNE <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98021	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAFFEE, DIANNE <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAFFEE, DIANNE <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 665/4629 Rpt: 668/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAGANI, FARHAN <hr/> 6 Contributor address; City; State; Zip Code CONVERSE, TX 78109	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) XPEL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAHAL, BHUPINDER <hr/> Contributor address; City; State; Zip Code TRACY, CA 95376	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAKRAVORTY, SUDEEP <hr/> Contributor address; City; State; Zip Code WEXFORD, PA 15090	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHALMERS, GETCHEN <hr/> Contributor address; City; State; Zip Code PEORIA, AZ 85383	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHALMERS, GETCHEN <hr/> Contributor address; City; State; Zip Code PEORIA, AZ 85383	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 666/4629 Rpt: 669/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHALMERS, GETCHEN <hr/> 6 Contributor address; City; State; Zip Code PEORIA, AZ 85383	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERLAIN, FRED <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERLAIN, FRED <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERLAIN, FRED <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERLAIN, JOHN <hr/> Contributor address; City; State; Zip Code STURGIS, SD 57785	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 667/4629 Rpt: 670/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERLIN, ROILEEN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERS, KATHLEEN <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERS, KATHLEEN <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBLESS, TAMARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBLESS, TAMARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 668/4629 Rpt: 671/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBLISS, DEMETHOUS <hr/> 6 Contributor address; City; State; Zip Code MANSFIELD, TX 76063	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) DEE CHAMBLISS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMPAGNE, JENNIFER <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR, GRASSROOTS ADVOCACY		Employer (See Instructions) LEUKEMIA AND LYMPHOMA SOCIETY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMPNEY, LINDA <hr/> Contributor address; City; State; Zip Code NORTH OGDEN, UT 84414-1227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAN, BENNY <hr/> Contributor address; City; State; Zip Code JERSEY CITY, NJ 07305	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) VETTA BRANDS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAN, BYRON <hr/> Contributor address; City; State; Zip Code ALPHARETTA, GA 30005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) PG FOSTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 669/4629 Rpt: 672/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANCE, SARAH	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131		
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SARAH CHANCE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANCE, SARAH	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76131		
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SARAH CHANCE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAND, LB	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KEENE, TX 76059		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, BARBARA	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code DEERFIELD, IL 60015		
Principal occupation / Job title (See Instructions) NON PROFIT		Employer (See Instructions) JCFS
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, BARBARA	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code DEERFIELD, IL 60015		
Principal occupation / Job title (See Instructions) NON PROFIT		Employer (See Instructions) JCFS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 670/4629 Rpt: 673/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, DAVID <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60608	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, DAVID <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60608	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, ERIC <hr/> Contributor address; City; State; Zip Code DENVER, CO 80220	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SCHOOL ADMINISTRATOR		Employer (See Instructions) KENT DENVER SCHOOL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, GENEVIEVE <hr/> Contributor address; City; State; Zip Code LEVERETT, MA 01054	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, JOSEPH <hr/> Contributor address; City; State; Zip Code LANHAM, MD 20706	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 671/4629 Rpt: 674/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, SANDY <hr/> 6 Contributor address; City; State; Zip Code TYBEE ISLAND, GA 31328	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, SHARON <hr/> Contributor address; City; State; Zip Code HEWITT, TX 76643	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, SHARON <hr/> Contributor address; City; State; Zip Code HEWITT, TX 76643	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER, SHARON <hr/> Contributor address; City; State; Zip Code HEWITT, TX 76643	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDOO, MUJAHID <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) MICHAEL BAKER INTERNATIONAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 672/4629 Rpt: 675/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDRASEKHARAN, REUBEN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GALVESTON, TX 77554		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDRASEKHARAN, REUBEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GALVESTON, TX 77554		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDRASEKHARAN, REUBEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GALVESTON, TX 77554		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDRASHEKAR, ALAIAH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code TROY, MI 48084		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NTT DATA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANEY, EVETTE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SOMERSET COUNTY, NJ 08873		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 673/4629 Rpt: 676/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANEY, JAMES <hr/> 6 Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578	7 Amount of Contribution (\$) \$21.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANEY, LAURIE <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANEY, M-E <hr/> Contributor address; City; State; Zip Code HARBOR SPRINGS, MI 49740	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HAMDEN EDUX
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, APRIL LEC <hr/> Contributor address; City; State; Zip Code NEWARK, DE 19711	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, APRIL LEC <hr/> Contributor address; City; State; Zip Code NEWARK, DE 19711	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 674/4629 Rpt: 677/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, CAROL <hr/> 6 Contributor address; City; State; Zip Code FAIRVIEW, TX 75069	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, CAROLYN <hr/> Contributor address; City; State; Zip Code MOUNT HOLLY, NJ 08060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) AUSTIN REGIONAL CLINIC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, ELLEN <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) FREELANCE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, GENE <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98004	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) HIMALAYA CAPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 675/4629 Rpt: 678/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, SAMANTHA	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131		
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) DELOITTE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANG, VANESSA L	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MC ALLEN, TX 78501-1144		
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) SELF, NOLANA EYE CARE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANGE, AVOLENE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALVIN, TX 77511		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANGE, AVOLENE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALVIN, TX 77511		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANTER, HILDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 676/4629 Rpt: 679/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAO, ANGELA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78730	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ENGINEER ARCHITECT		9 Employer (See Instructions) DELL
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAO, ANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) LECTURER		Employer (See Instructions) RICE UNIVERSITY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAO, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTHEALTH
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAO, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPIN, JOANNE <hr/> Contributor address; City; State; Zip Code MESA, AZ 85209	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 677/4629 Rpt: 680/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPIN, JOANNE <hr/> 6 Contributor address; City; State; Zip Code MESA, AZ 85209	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPIN, N <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPIN, N <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPINRIENZO, SHANDA <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) UNIVERSITY OF CALIFORNIA
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, DON <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 678/4629 Rpt: 681/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, DON <hr/> 6 Contributor address; City; State; Zip Code ELGIN, TX 78621	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, LOU <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) LOU CHAPMAN WORKS LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, ROB <hr/> Contributor address; City; State; Zip Code DOWNTOWN, PA 19335	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, ROB <hr/> Contributor address; City; State; Zip Code DOWNTOWN, PA 19335	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, RON <hr/> Contributor address; City; State; Zip Code PHOENIX, AZ 85014	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) OAF		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 679/4629 Rpt: 682/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, STEPHEN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ALLEN, TX 75002		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPPELLE, JERRY	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARLESTON, KYONNA M	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) AYA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARMAN, MARICELA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARNSANGAVEJ, LARISSA	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code OAKLAND, CA 94607		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 680/4629 Rpt: 683/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARNSANGAVEJ, LARISSA <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94607	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, VICTOR <hr/> Contributor address; City; State; Zip Code TIFFIN, OH 44883	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IND. AGENT MERCHANT SERVICES		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IND. AGENT MERCHANT SERVICES		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, DAVID <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FILM DIRECTOR		Employer (See Instructions) DAVID CHASE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 681/4629 Rpt: 684/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, DEBRA <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, DEBRA <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, MARTHA <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, MARTHA <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, SCOTT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 682/4629 Rpt: 685/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, SCOTT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75208	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 683/4629 Rpt: 686/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 684/4629 Rpt: 687/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 685/4629 Rpt: 688/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASE JR, THEODORE <hr/> Contributor address; City; State; Zip Code PRINCETON, NJ 08540	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASET, MARJORIE <hr/> Contributor address; City; State; Zip Code RODEO, CA 94572	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MARRIAGE AND FAMILY THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASIN, MARK <hr/> Contributor address; City; State; Zip Code WEST ORANGE, NJ 07052-6603	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASTANG, RITA <hr/> Contributor address; City; State; Zip Code SOUTHFIELD, MI 48033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 686/4629 Rpt: 689/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHATHAM, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77088	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAU, ISABELLE <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SHEGERIAN & ASSOCIATES
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAUSSEE, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR DIRECTOR		Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAUSSEE, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR DIRECTOR		Employer (See Instructions) SOUTHWEST AIRLINES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVARRIA, VICKIE <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) TEAM LEAD		Employer (See Instructions) WALMART

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 687/4629 Rpt: 690/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, ARACELY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76133	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		9 Employer (See Instructions) FWISD
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, ARACELY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) FWISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, DEBORAH <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, DEBORAH <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, DEBORAH <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 688/4629 Rpt: 691/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, DEBORAH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BUDA, TX 78610		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, DEBORAH	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, DEBORAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, ERNESTO	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT EL PASO
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, ERNESTO	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT EL PASO

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 689/4629 Rpt: 692/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, HOME <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DOG WALKER		9 Employer (See Instructions) LEAHS PET SITTING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, JESSICA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HUMAN		Employer (See Instructions) HUMAN
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAVEZ, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEATUM, TAMMY <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PLANNING		Employer (See Instructions) MICROCHIP
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEATUM, TAMMY <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PLANNING		Employer (See Instructions) MICROCHIP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 690/4629 Rpt: 693/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEEK, GEOFFREY <hr/> 6 Contributor address; City; State; Zip Code MOUNT PLEASANT, SC 29464	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) THERAPIST		9 Employer (See Instructions) MUSC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEMEL, LEE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TV DIRECTOR		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, CY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) BUSINESS MAN		Employer (See Instructions) JOYME CAPITAL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, HAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, LILY <hr/> Contributor address; City; State; Zip Code CARY, NC 27519	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) NORTH CAROLINA CENTRAL UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 691/4629 Rpt: 694/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, VA 22201	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) SELF-EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, SHUQIAO <hr/> Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49546	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GE AVIATION
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, SHUQIAO <hr/> Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49546	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GE AVIATION
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, STEVE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) TENNINGTON INVESTMENTS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, TAK MING <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 692/4629 Rpt: 695/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, WEN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78749		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) AMD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEN, ZHUO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MARIETTA, GA 30068-4276		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF GEORGIA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHENG, PENG	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SARATOGA, CA 95070		
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) SV TECH VENTURES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHENG, YU	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75025		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) POLYTRONIX, INC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHENG, ZHENGANG	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code RALEIGH, NC 27606		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 693/4629 Rpt: 696/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHENG, ZHENGANG <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHENG, ZHENGANG <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHENIER, MARGARET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHERESKIN, TED <hr/> Contributor address; City; State; Zip Code LONG BEACH, NY 11561	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HEWLETT-WOODMERE PUBLIC SCHOOLS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHERNE, JUSTINE <hr/> Contributor address; City; State; Zip Code NEEDVILLE, TX 77461-9516	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) ALLEN BOONE HUMPHRIES ROBINSON LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 694/4629 Rpt: 697/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHERNE, JUSTINE <hr/> 6 Contributor address; City; State; Zip Code NEEDVILLE, TX 77461-9516	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		9 Employer (See Instructions) ALLEN BOONE HUMPHRIES ROBINSON LLP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHERNEK, PETER <hr/> Contributor address; City; State; Zip Code NEWBURGH, NY 12550	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) CORNELL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHERRY, CHARLES <hr/> Contributor address; City; State; Zip Code NEWTOWN SQUARE, PA 19073	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESHIRE, LORRIE <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESLER, EMILY <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ALTERYX INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 695/4629 Rpt: 698/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESLER, EMILY <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11216	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) ALTERYX INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESLER, MITCHELL <hr/> Contributor address; City; State; Zip Code FOREST HILLS, NY 11375-6130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) NYU SCHOOL OF MEDICINE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESTER, DR. <hr/> Contributor address; City; State; Zip Code HEWITT, NJ 07421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHESTER, DR. <hr/> Contributor address; City; State; Zip Code HEWITT, NJ 07421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEVALIER, DAWN <hr/> Contributor address; City; State; Zip Code NORTH CHELMSFORD, MA 01863	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 696/4629 Rpt: 699/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEW, LINDA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79930-1805	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEW, LINDA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEW, LINDA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHEW, LINDA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930-1805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHHOR, RATANA <hr/> Contributor address; City; State; Zip Code BELLFLOWER, CA 90706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TIMMONS SUBARU

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 697/4629 Rpt: 700/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIADO, JULIANA <hr/> 6 Contributor address; City; State; Zip Code PALOS VERDES, CA 90274	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIADO, JULIANA <hr/> Contributor address; City; State; Zip Code PALOS VERDES ESTATES, CA 90274	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIARITO, BEBE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIARITO, BEBE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIARITO, BEBE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 698/4629 Rpt: 701/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHICAS, YANINA <hr/> 6 Contributor address; City; State; Zip Code RALEIGH, NC 27606	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SOFTWARE SALES		9 Employer (See Instructions) OSTEOID
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIKI, PAUL <hr/> Contributor address; City; State; Zip Code GARY, IN 46403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDERS, MR DANIEL A <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60637	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) BLOOMBERG LP
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDERS, MR DANIEL A <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60637	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) BLOOMBERG LP
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, BOB <hr/> Contributor address; City; State; Zip Code HALTOM CITY, TX 76137	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 699/4629 Rpt: 702/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, CHARLES <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, CHARLES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, CHARLES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, CHARLES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, CHARLES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 700/4629 Rpt: 703/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, JILL <hr/> 6 Contributor address; City; State; Zip Code DUNWOODY, GA 30338	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILTON, MARGARET <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIMENE, JB <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) INNKEEPER		Employer (See Instructions) CABINS ON WILD CURRANT FARM
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHINO, VERA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHINO, VERA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 701/4629 Rpt: 704/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIONG, LAUREN IVY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) WEB CONTENT LEAD		9 Employer (See Instructions) COMMONWEALTH OF MA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIOU, AMU <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60607	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SENIOR DIRECTOR		Employer (See Instructions) DNCC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIPMAN, ERNESTINE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIPMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIPMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 702/4629 Rpt: 705/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIRAVURI, KRISHNAKANTH <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) BUSINESS ANALYST		9 Employer (See Instructions) IUZEIT INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHISHOLM, KIM <hr/> Contributor address; City; State; Zip Code ST JOHN, DC 20000	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHISHTEY, MAHA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHISLENKO, JULIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10021	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHITJIAN, GLENN <hr/> Contributor address; City; State; Zip Code FULLERTON, CA 92835	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMPUTER TECH		Employer (See Instructions) AFFORDABLE POS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 703/4629 Rpt: 706/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHITTY, JOHN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PRESSMAN		9 Employer (See Instructions) USBEP
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIVIAN, COBY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243-2473	Amount of Contribution (\$) \$111.00
Principal occupation / Job title (See Instructions) ACCOUNTS PAYABLE SPECIALIST		Employer (See Instructions) PANDA POWER FUNDS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHMELECK, MARIANNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHMELECK, MARIANNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHMELECK, MARIANNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 704/4629 Rpt: 707/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHMELECK, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$20.22
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHO, BRITTANY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHO, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOATE, EVAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) RICE UNIVERSITY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOATE, EVAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) RICE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 705/4629 Rpt: 708/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOBAN, GREGORY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOINIERE, MONIQUE <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) USPTO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOPRA, ANIL <hr/> Contributor address; City; State; Zip Code MILPITAS, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) MISS ABHA'S DAYCARE.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOU, BENJAMIN <hr/> Contributor address; City; State; Zip Code HAVRE DE GRACE, MD 21078	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SENIOR MECHANICAL DESIGN ENGINEER		Employer (See Instructions) BENJAMIN CHOU
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOUINARD, SUSAN <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 706/4629 Rpt: 709/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRIST, KAY <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60657	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CORPORATE COMMUNICATIONS		9 Employer (See Instructions) CHRIST-TOMEI, INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTEL, KELLIE <hr/> Contributor address; City; State; Zip Code WHEATON, IL 60189	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) IEMS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTEL, KELLIE <hr/> Contributor address; City; State; Zip Code WHEATON, IL 60189	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) IEMS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTENSEN, JIM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTENSEN, KAREN <hr/> Contributor address; City; State; Zip Code SANTA ANA, CA 92706	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 707/4629 Rpt: 710/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTIAN, JAMES <hr/> 6 Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	7 Amount of Contribution (\$) \$16.66
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SPECTRUM HEALTHCARE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTIAN, LISA <hr/> Contributor address; City; State; Zip Code DENVER, CO 80220	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) US DEPT OF AGRICULTURE
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTIAN, LISA <hr/> Contributor address; City; State; Zip Code DENVER, CO 80220	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) US DEPT OF AGRICULTURE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTIANSEN, ANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTIANSEN, ANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 708/4629 Rpt: 711/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTNER, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840-6159	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROPERTY MANAGEMENT		9 Employer (See Instructions) SELF-EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTNER, CYNTHIA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840-6159	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGEMENT		Employer (See Instructions) SELF-EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTNER, CYNTHIA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840-6159	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGEMENT		Employer (See Instructions) SELF-EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOFFEL, JOSEPH <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOFFEL, JOSEPH <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 709/4629 Rpt: 712/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOPHER, ELRICA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTOPHER, NORMAN <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRONIS, PENELOPE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHU, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CRAFT CHU PLLC
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHU, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CRAFT CHU PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 710/4629 Rpt: 713/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHU, ANDREW <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) CRAFT CHU PLLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHU, S.C. <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10005	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) EXAMINER		Employer (See Instructions) FHFA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCH, DEBRA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXEC ASST		Employer (See Instructions) QRI INTERNATIONAL
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCH, GORDON <hr/> Contributor address; City; State; Zip Code KIRKLAND, WA 98033	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCH, GORDON <hr/> Contributor address; City; State; Zip Code KIRKLAND, WA 98033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 711/4629 Rpt: 714/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCH, GORDON <hr/> 6 Contributor address; City; State; Zip Code KIRKLAND, WA 98033	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCH, GORDON <hr/> Contributor address; City; State; Zip Code KIRKLAND, WA 98033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHILL, JEAN M <hr/> Contributor address; City; State; Zip Code KINGSTON, NY 12401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHILL, LAURA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHILL, LAURA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 712/4629 Rpt: 715/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHILL, LAURA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHILL, LAURA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHWELL, CHARLES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PODIATRIST/LAWYER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCHWELL, CHARLES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PODIATRIST/LAWYER		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURTON, PETER <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHOTOJOURNALIST		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 713/4629 Rpt: 716/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURTON, PETER <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77708	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PHOTOJOURNALIST		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHUZUM, LORETTA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) THE WOODLANDS COUNTRY CLUB
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHYO, GI SUK <hr/> Contributor address; City; State; Zip Code PACIFIC GROVE, CA 93950	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHYO, GI SUK <hr/> Contributor address; City; State; Zip Code PACIFIC GROVE, CA 93950	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHYO, GI SUK <hr/> Contributor address; City; State; Zip Code PACIFIC GROVE, CA 93950	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 714/4629 Rpt: 717/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIARELLI, DAMON <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 11778	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		9 Employer (See Instructions) REELIO INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIARROCCHI, ERNEST <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIARROCCHI, ERNEST <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIAVERELLI, JIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043-4659	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIFOR, JOHN <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32804	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 715/4629 Rpt: 718/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CILLEY, MARY <hr/> 6 Contributor address; City; State; Zip Code PITTSBORO, NC 27312	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CINCLAIR JR, R J <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CINCLAIR LAW
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIOFFI, NICK <hr/> Contributor address; City; State; Zip Code NINETY SIX, SC 29666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIPORA, JOHN <hr/> Contributor address; City; State; Zip Code PALMER, MA 01069	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SPRINGFIELD COLLEGE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIPORA, JOHN <hr/> Contributor address; City; State; Zip Code PALMER, MA 01069	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SPRINGFIELD COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 716/4629 Rpt: 719/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRILLO, KEITH	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code SEATTLE, WA 98117		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRILLO, KEITH	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SEATTLE, WA 98117		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRILLO, KEITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SEATTLE, WA 98117		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CITIZEN, ANGELA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TUCSON, AZ 85750		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) AMIS REALTY SERVICES LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CITZMAN, MANFRED	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 717/4629 Rpt: 720/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIUFFO, ALICE <hr/> 6 Contributor address; City; State; Zip Code WHITING, NJ 08759	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIULEI, REBECCA <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIVIL ENGINEERS, INC., ENTECH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77094	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ENTECH CIVIL ENGINEERS, INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLABIORNE, CARLOS <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) SABRE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAGHORN MILLER, DIANE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 718/4629 Rpt: 721/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAIRE, MARGARET <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) CONNECTIVE HOME HEALTH
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, ANN <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, ANN <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, BECKY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, ERIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) DIESTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 719/4629 Rpt: 722/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, GARY	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TWO RIVERS, WI 54241		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, GEORGE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, GEORGE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, JOAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOLLISTON, MA 01746-1429		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, JOAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOLLISTON, MA 01746-1429		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 720/4629 Rpt: 723/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, JOAN	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code HOLLISTON, MA 01746-1429	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, KAREN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code RICHARDSON, TX 75080	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, KATHY	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, KATHY	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, KRIS	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 721/4629 Rpt: 724/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, LINDA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TORRANCE, CA 90505		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, LINDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TORRANCE, CA 90505		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, MAUREEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TUCSON, AZ 85712		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, MELISSA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SPRINGFIELD, NJ 07081		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, MIKE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MJC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 722/4629 Rpt: 725/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, NATHAN	7 Amount of Contribution (\$) \$20.24
6 Contributor address; City; State; Zip Code FATE, TX 75087		
8 Principal occupation / Job title (See Instructions) SURVEYOR		9 Employer (See Instructions) LTRA
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, NATHAN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code FATE, TX 75087		
Principal occupation / Job title (See Instructions) SURVEYOR		Employer (See Instructions) LTRA
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, NATHAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FATE, TX 75087		
Principal occupation / Job title (See Instructions) SURVEYOR		Employer (See Instructions) LTRA
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, NATHAN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code FATE, TX 75087		
Principal occupation / Job title (See Instructions) SURVEYOR		Employer (See Instructions) LTRA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, NATHAN	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code FATE, TX 75087		
Principal occupation / Job title (See Instructions) SURVEYOR		Employer (See Instructions) LTRA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 723/4629 Rpt: 726/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, NATHAN <hr/> 6 Contributor address; City; State; Zip Code FATE, TX 75087	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SURVEYOR		9 Employer (See Instructions) LTRA
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UTHSC HOUSTON
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, ROGER <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98225	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, ROGER <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98225	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, SHARON <hr/> Contributor address; City; State; Zip Code OXNARD, CA 93036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 724/4629 Rpt: 727/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, TIMOTHY	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code SEGUIN, TX 78155		
8 Principal occupation / Job title (See Instructions) ASSOCIATE REGISTRAR		9 Employer (See Instructions) TEXAS LUTHERAN UNIVERSITY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, TIMOTHY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) ASSOCIATE REGISTRAR		Employer (See Instructions) TEXAS LUTHERAN UNIVERSITY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, TIMOTHY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) ASSOCIATE REGISTRAR		Employer (See Instructions) TEXAS LUTHERAN UNIVERSITY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, TODD	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, VIRGINIA	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005-1730		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 725/4629 Rpt: 728/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, WILLARD	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78215		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) MISSION INJURY LAW
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, WILLIAM J.	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code POWHATAN, VA 23139		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK-FIELDER, FRANCES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code KATY, TX 77493		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK-FIELDER, FRANCES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code KATY, TX 77493		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, JODY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 726/4629 Rpt: 729/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, JODY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75229	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DESIGNER		9 Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, JODY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, JUDITH <hr/> Contributor address; City; State; Zip Code DRESDEN, ME 04342	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, JUDITH <hr/> Contributor address; City; State; Zip Code DRESDEN, ME 04342	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, JUDITH <hr/> Contributor address; City; State; Zip Code DRESDEN, ME 04342	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 727/4629 Rpt: 730/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) WOOD PLC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, RODNEY <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE, TIM <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PM		Employer (See Instructions) ST
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLASEN, GINGER <hr/> Contributor address; City; State; Zip Code BELLE CHASSE, LA 70037	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAY, JUDY <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75010	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 728/4629 Rpt: 731/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAY, MIKE <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAY, YOLANDA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAY, YOLANDA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAY-EMERSON, MARIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAY-EMERSON, MARIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 729/4629 Rpt: 732/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, ANN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ROWLETT, TX 75088		
8 Principal occupation / Job title (See Instructions) ESCROW OFFICER		9 Employer (See Instructions) HOMELIGHT SETTLEMENT LLC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, ANN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROWLETT, TX 75088		
Principal occupation / Job title (See Instructions) ESCROW OFFICER		Employer (See Instructions) HOMELIGHT SETTLEMENT LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MARQUETTA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76028		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE CLAYTON LAW FIRM
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MARQUETTA	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76028		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE CLAYTON LAW FIRM
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MARQUETTA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76028		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE CLAYTON LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 730/4629 Rpt: 733/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MICHELLE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code KNOXVILLE, TN 37922		
8 Principal occupation / Job title (See Instructions) FARMER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MICHELLE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code KNOXVILLE, TN 37922-6650		
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MICHELLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code KNOXVILLE, TN 37922-6650		
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) NONE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MICHELLE	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code KNOXVILLE, TN 37922-6650		
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, MICHELLE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code KNOXVILLE, TN 37922-6650		
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 731/4629 Rpt: 734/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, TERRY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code NASHVILLE, TN 37207		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYTON, TERRY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NASHVILLE, TN 37207		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEGG, DOUGLAS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NAMPA, ID 83686		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEGG, JERRY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTER, IN 46304		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLELLAND, ROBERT	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LA JOLLA, CA 92037		
Principal occupation / Job title (See Instructions) INVESTMENT ADVISOR		Employer (See Instructions) CLELLAND & COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 732/4629 Rpt: 735/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEM, TED <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PHYSICIST		9 Employer (See Instructions) EPS CORP
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEM, TED <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIST		Employer (See Instructions) EPS CORP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEM, TED <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEM, TED <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEM, TED <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 733/4629 Rpt: 736/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENS, CAMILLE <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77842	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENT, EMILY <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENT, KEVIN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENT, TODD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CLEMENT + SPEER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENTS, HELEN <hr/> Contributor address; City; State; Zip Code STILLWATER, OK 74074	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 734/4629 Rpt: 737/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMENTS, KAREY <hr/> 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) FH&W
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMON, MICHELLE <hr/> Contributor address; City; State; Zip Code IRONDALE, AL 35210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CLEMON CONSULTING GROUP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, BARI <hr/> Contributor address; City; State; Zip Code KIRKLAND, WA 98034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, KAT <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DEVELOPMENT DIRECTOR		Employer (See Instructions) BAY AREA TURNING POINT
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, KENNY <hr/> Contributor address; City; State; Zip Code NEW ROCHELLE, NY 10804	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 735/4629 Rpt: 738/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, KENNY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code NEW ROCHELLE, NY 10804		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WACO, TX 76703		
Principal occupation / Job title (See Instructions) EDUCATION CONSULTANT		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WACO, TX 76703		
Principal occupation / Job title (See Instructions) EDUCATION CONSULTANT		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WACO, TX 76703		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEXAS EDUCATION MARKETING LP
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEMONS, ROBERT	Amount of Contribution (\$) \$130.00
Contributor address; City; State; Zip Code WACO, TX 76703		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEXAS EDUCATION MARKETING LP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 736/4629 Rpt: 739/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLENDENEN, BEVERLY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLENDENEN, BEVERLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLERC, CHANELLE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) HOSPITAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEVELAND, DERREL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358		
Principal occupation / Job title (See Instructions) FUNERAL DIRECTOR		Employer (See Instructions) DIGNITY ENCORP.
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEVELAND, PAMELA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code TEMPLE, TX 76502-7813		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) UCLA HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 737/4629 Rpt: 740/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEVELAND, PAMELA <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MEDICAL MUTUAL OF OHIO
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEVELAND, PAMELA <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MEDICAL MUTUAL OF OHIO
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEVENGER, SR., GLENN <hr/> Contributor address; City; State; Zip Code HEISKELL, TN 37754	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, CINDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER, PUBLIC RELATIONS CO		Employer (See Instructions) THE CLIFFORD GROUP, INC.
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, CINDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) OWNER, PUBLIC RELATIONS CO		Employer (See Instructions) THE CLIFFORD GROUP, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 738/4629 Rpt: 741/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, CYNTHIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ORANGE CITY, FL 32763		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, CYNTHIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ORANGE CITY, FL 32763		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, CYNTHIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ORANGE CITY, FL 32763		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, CYNTHIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ORANGE CITY, FL 32763		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, ROBERT	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 739/4629 Rpt: 742/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFFORD, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFTON, CHARLES <hr/> Contributor address; City; State; Zip Code HADLEY, MA 01054	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFTON, CHARLES <hr/> Contributor address; City; State; Zip Code HADLEY, MA 01054	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIFTON, EMILY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLINESMITH, CURTIS <hr/> Contributor address; City; State; Zip Code DENTON, TX 76205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 740/4629 Rpt: 743/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLINESMITH, CURTIS <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76205	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIVE, REBECCA <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIVE, REBECCA <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLIVE, REBECCA <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLONINGER, PEGGY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON-VICTORIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 741/4629 Rpt: 744/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLONINGER, PEGGY <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF HOUSTON-VICTORIA
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOSE, ELEANOR <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOSE, ELEANOR <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY-SAN MARCOS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOSE, ELEANOR <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOSE, MYLA <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 742/4629 Rpt: 745/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOSS, THOMAS <hr/> 6 Contributor address; City; State; Zip Code PARKER, CO 80134	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOUD, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOUSTON, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SESSIONS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOWER, GEORGE E <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78463	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLOWER, GEORGE E <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78463	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 743/4629 Rpt: 746/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COAD, ALICE	7 Amount of Contribution (\$) \$115.00
6 Contributor address; City; State; Zip Code WEBSTER, TX 77598-1563		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COATES, KAREN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SPRING, TX 77389-1782		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COATS, MICHELLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PACIFIC GROVE, CA 93950		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COATS, MICHELLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PACIFIC GROVE, CA 93950		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBARRUVIAS, JOHN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 744/4629 Rpt: 747/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBARRUVIAS, JOHN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBARRUVIAS, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBB, GARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBB, GEORGE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIV
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBB, GEORGE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 745/4629 Rpt: 748/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBLENTZ, LINDA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBO, PETER <hr/> Contributor address; City; State; Zip Code ROSEVILLE, CA 95747	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) AMERGIS HEALTHCARE STAFFING
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COBO, PETER <hr/> Contributor address; City; State; Zip Code ROSEVILLE, CA 95747	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) AMERGIS HEALTHCARE STAFFING
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCCHINI, ELIZABETH <hr/> Contributor address; City; State; Zip Code CALIMESA, CA 92320	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHINWALA, FUAD <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) PRESIDENT /CEO		Employer (See Instructions) ONE STEP DIAGNOSTIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 746/4629 Rpt: 749/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, EARLENE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77088	7 Amount of Contribution (\$) \$12.01
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, KAREN <hr/> Contributor address; City; State; Zip Code WINTER PARK, FL 32792	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) PHILANTHROPY INNOVATORS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, KAREN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PETROLEUM LANDMAN		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, KAREN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PETROLEUM LANDMAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCHRAN, SUSAN <hr/> Contributor address; City; State; Zip Code EDGEWATER, MD 21037	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 747/4629 Rpt: 750/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKERELL, LAVONNE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76116-8462		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKERELL, LAVONNE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76116-8462		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKERELL, S. LAVONNE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76104		
Principal occupation / Job title (See Instructions) YOUNG LIVING ESSENTIAL OILS DISTRIBUTOR		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKERELL, S. LAVONNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76104		
Principal occupation / Job title (See Instructions) YOUNG LIVING ESSENTIAL OILS DISTRIBUTOR		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKRELL, KENDALL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) DEVELOPMENT OFFICER		Employer (See Instructions) BAYLOR UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 748/4629 Rpt: 751/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKRELL, KENDALL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code WACO, TX 76710		
8 Principal occupation / Job title (See Instructions) DEVELOPMENT OFFICER		9 Employer (See Instructions) BAYLOR UNIVERSITY
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COCKRELL, KENDALL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) DEVELOPMENT OFFICER		Employer (See Instructions) BAYLOR UNIVERSITY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CODDINGTON, PARKER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROWLETT, TX 75089		
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CODDINGTON, PARKER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROWLETT, TX 75089		
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CODY, JUDY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BOULDER, CO 80302		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 749/4629 Rpt: 752/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COE, MARGARET <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LAKE TRAVIS ISD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COE, MARGARET <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAKE TRAVIS ISD
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COEN, LEONA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PET SITTER		Employer (See Instructions) LEONA COEN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFER, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746-5507	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) HILL COUNTRY CONSERVANCY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFER, RICK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) COFER & CONNELLY, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 750/4629 Rpt: 753/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFER, JOHN G <hr/> 6 Contributor address; City; State; Zip Code CALABASAS, CA 91302	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, MIMI <hr/> Contributor address; City; State; Zip Code FORT WORRH, TX 76108	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) THE COFFEY FIRM
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, MIMI <hr/> Contributor address; City; State; Zip Code FORT WORRH, TX 76108	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) THE COFFEY FIRM
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, MIMI <hr/> Contributor address; City; State; Zip Code FORT WORRH, TX 76108	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) THE COFFEY FIRM
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, NELWYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 751/4629 Rpt: 754/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, NELWYN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77040		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, NELWYN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77040		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, NELWYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77040		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFIN, JUDITH	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) PROF		Employer (See Instructions) UT AUSTIN
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFIN, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DURHAM, NC 27703-8190		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) APPLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 752/4629 Rpt: 755/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFMAN, DAVID <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFMAN, DAVID <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFMAN, LINDA BURNS <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28270	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFMAN, VICKI <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFIELD, BRANDON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$59.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 753/4629 Rpt: 756/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFRIN, DAVID <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30306	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFRIN, DAVID <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFRIN, DAVID <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGER, ZAN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75039	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, ADAM <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$12,000.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) RANGER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 754/4629 Rpt: 757/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, BOBBIE & ROY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77071	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, BOBBIE & ROY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, BOBBIE & ROY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, EDWARD <hr/> Contributor address; City; State; Zip Code PALM BEACH GARDENS, FL 33418-8000	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, ELLEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 755/4629 Rpt: 758/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, JENNIFER	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BROOKLYN, NY 11205		
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SVA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, JESSICA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78741		
Principal occupation / Job title (See Instructions) SR. NETWORK ENGINEER		Employer (See Instructions) ASPIRUS INC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, JESSICA	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78741		
Principal occupation / Job title (See Instructions) SR. NETWORK ENGINEER		Employer (See Instructions) ASPIRUS INC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, JESSICA	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78741		
Principal occupation / Job title (See Instructions) SR. NETWORK ENGINEER		Employer (See Instructions) ASPIRUS INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, JONATHAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code VALLEY FORD, CA 94972-0548		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 756/4629 Rpt: 759/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, JONATHAN	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code VALLEY FORD, CA 94972-0548		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, LAURA	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) GOLIATH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, LEONARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BALTIMORE, MD 21209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, MIYE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, NAOMI	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code GAP MILLS, WV 24941		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 757/4629 Rpt: 760/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, PETER & SUE	7 Amount of Contribution (\$) \$36.00
6 Contributor address; City; State; Zip Code ROCKVILLE, MD 20853		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, SHARON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OAKLAND, CA 94618		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, SHARON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code OAKLAND, CA 94618		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, STEVEN	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code PRIDES CROSSING, MA 01965		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, STEVEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PRIDES CROSSING, MA 01965		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 758/4629 Rpt: 761/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, STEVEN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PRIDES CROSSING, MA 01965		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, WILLIAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77068-3812		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COHEN, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77068-3812		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COINDREAU, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626-2041		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) ST DAVIDS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COINDREAU, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626-2041		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) ST DAVIDS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 759/4629 Rpt: 762/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COINER, DRU <hr/> 6 Contributor address; City; State; Zip Code YUCCA VALLEY, CA 92286	7 Amount of Contribution (\$) \$100.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COJULUN, TANYA <hr/> Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COKER, KYLE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$355.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBERT, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBERT, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 760/4629 Rpt: 763/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBERT, PAUL	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBERT, PAUL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBERT, PAUL	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBURN, LAURA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737-4858		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBURN, LAURA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737-4858		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 761/4629 Rpt: 764/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBURN, LAURA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737-4858	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBURN, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBURN, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLBY, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARTIST, DEBATE COACH, WRITER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLDIRON, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 762/4629 Rpt: 765/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLDIRON, RON	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NO MORE!
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLDIRON, RON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO MORE!
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLDIRON, RON	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO MORE!
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLDIRON, RON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO MORE!
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLDSMITH, APRIL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 763/4629 Rpt: 766/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, BRENDA J <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CELIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) FEEDING TEXAS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CELIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) FEEDING TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CHRISTINA <hr/> Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CHRISTINA <hr/> Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 764/4629 Rpt: 767/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CHRISTINA <hr/> Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, DEL <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, FAITH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, JENNIE <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98146	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) SHJ ELECTRIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 765/4629 Rpt: 768/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, KIMBLEY <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, LOU ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, LOU ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, LOU ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, LUCY <hr/> Contributor address; City; State; Zip Code SAN DIMAS, CA 91773	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 766/4629 Rpt: 769/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, SHERYL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78722	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SHERYL COLE ASSOCIATES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, STEPHANIE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SYNDIANT, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, TAMI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, TERRI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, TOMMY <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 767/4629 Rpt: 770/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, TOMMY <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE-INGBER, CONNIE <hr/> Contributor address; City; State; Zip Code OXFORD, CT 06478	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) YNHH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, DANIEL <hr/> Contributor address; City; State; Zip Code GLEN ELLEN, CA 95442	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, DEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, DEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 768/4629 Rpt: 771/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, DONALD <hr/> 6 Contributor address; City; State; Zip Code EADS, TN 38028	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, EUGENE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 769/4629 Rpt: 772/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77288	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, GARNET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77288	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, JADE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) AQUARIUS MANAGER		Employer (See Instructions) CITY OF GEORGETOWN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 770/4629 Rpt: 773/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, JIM <hr/> 6 Contributor address; City; State; Zip Code BANNOCKBURN, IL 60015	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PRIVATE EQUITY		9 Employer (See Instructions) GENERATION 3 CAPITAL LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, JIM <hr/> Contributor address; City; State; Zip Code BANNOCKBURN, IL 60015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRIVATE EQUITY		Employer (See Instructions) GENERATION 3 CAPITAL LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, NATHAN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, NATHAN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, PERRY <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT SPECIALIST		Employer (See Instructions) USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 771/4629 Rpt: 774/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEMAN, ROBERT	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75214		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLEY, KITTY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGAN-DAVIS, JOHN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGAN-DAVIS, JOHN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGAN-DAVIS, JOHN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 772/4629 Rpt: 775/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLIN, PEDRO. <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79904	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLAZO, CRISTA <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PUBLIC DEFENDER OFFICE NC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLAZO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLAZO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLAZO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 773/4629 Rpt: 776/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLAZO, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code NEDERLAND, TX 77627	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLER, CRAIG <hr/> Contributor address; City; State; Zip Code MIAMI BEACH, FL 33140	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CRAIG COLLER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLETTE, FRANCES C <hr/> Contributor address; City; State; Zip Code BOISE, ID 83707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIANDER, KELSEY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, CATHERINE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76114	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 774/4629 Rpt: 777/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76114	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, CATHY <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, CATHY <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749-4046	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, JOSEPH <hr/> Contributor address; City; State; Zip Code COLD SPRING, KY 41076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 775/4629 Rpt: 778/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code COLD SPRING, KY 41076	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, RABEEA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, RABEEA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, VIKI <hr/> Contributor address; City; State; Zip Code GOODRICH, TX 77335	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, VIKI <hr/> Contributor address; City; State; Zip Code GOODRICH, TX 77335	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 776/4629 Rpt: 779/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, VIKI <hr/> 6 Contributor address; City; State; Zip Code GOODRICH, TX 77335	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, VIKI <hr/> Contributor address; City; State; Zip Code GOODRICH, TX 77335	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER, VIKI <hr/> Contributor address; City; State; Zip Code GOODRICH, TX 77335	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER CAMPAIGN, NICOLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76124	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE, HOUSE DISTRICT 95		Employer (See Instructions) STATE OF TEXAS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIER CAMPAIGN, NICOLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76124	Amount of Contribution (\$) \$1,481.29
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE, HOUSE DISTRICT 95		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 777/4629 Rpt: 780/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, CHAD	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code MANHATTAN, NY 10017		
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, KEVIN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) BLUE GENIE ART
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, LAURI	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, REBA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, REBA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 778/4629 Rpt: 781/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code WOODLAND HILLS, CA 91367	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, STEPHEN <hr/> Contributor address; City; State; Zip Code WOODLAND HILLS, CA 91367	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, STEPHEN <hr/> Contributor address; City; State; Zip Code WOODLAND HILLS, CA 91367	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, SUZY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, SUZY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) HOME TEAM OF AMERICA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 779/4629 Rpt: 782/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, SUZY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) HOME TEAM OF AMERICA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLIS, ARTHUR <hr/> Contributor address; City; State; Zip Code SOUTH PASADENA, CA 91030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COACH & HYPNOTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLMENERO, JANET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TAX EXAMINER		Employer (See Instructions) IRS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLON, BRIAN <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87113	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGING PARTNER		Employer (See Instructions) SINGLETON SCHREIBER
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLON, MD, JAVIER <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 780/4629 Rpt: 783/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLON, MELINDA <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20005	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) VP OF MEETINGS AND EVENTS		9 Employer (See Instructions) CCG
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLTER, ZACHERY <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INFRASTRUCTURE ENGINEER		Employer (See Instructions) BISHOP FOX
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMBS, JOHN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMBS, JOHN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMBS, JOHN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 781/4629 Rpt: 784/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMBS, VERONICA <hr/> 6 Contributor address; City; State; Zip Code FLOYDS KNOBS, IN 47119	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) HKA MARCOM
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMBS, VERONICA <hr/> Contributor address; City; State; Zip Code FLOYDS KNOBS, IN 47119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) HKA MARCOM
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAX, BOB <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAX, BOB <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAX, BOB <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 782/4629 Rpt: 785/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAUX, BOB <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAUX, JOANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMEAUX, LINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMER, JANE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMER, JANE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED PUBLIC SCHOOL TEACHER		Employer (See Instructions) DOES NOT APPLY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 783/4629 Rpt: 786/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMER, JANE <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMER, JANE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED PUBLIC SCHOOL TEACHER		Employer (See Instructions) DOES NOT APPLY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMER, JANE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED PUBLIC SCHOOL TEACHER		Employer (See Instructions) DOES NOT APPLY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMER, JANE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMMON, MARLENE <hr/> Contributor address; City; State; Zip Code REDWOOD CITY, CA 94062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 784/4629 Rpt: 787/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPERE, NANCY JANE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76116	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPOST, SHALOM <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95062	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPOST, SHALOM <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95062	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPOST, SHALOM <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95062	Amount of Contribution (\$) \$49.33
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 785/4629 Rpt: 788/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 786/4629 Rpt: 789/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 787/4629 Rpt: 790/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code AUSTIN, TX 78757		
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, ANNIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 788/4629 Rpt: 791/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, CAROLYN	7 Amount of Contribution (\$) \$20.24
6 Contributor address; City; State; Zip Code PALO ALTO, CA 94306		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, CAROLYN	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code PALO ALTO, CA 94306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, DOROTHY A	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code TAKOMA PARK, MD 20913		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, DOROTHY A	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code TAKOMA PARK, MD 20913		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, KRISTY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ABILENE, TX 79605		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 789/4629 Rpt: 792/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, KRISTY <hr/> 6 Contributor address; City; State; Zip Code ABILENE, TX 79605	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, REATHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$17.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, REATHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$17.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, TYLER <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94618	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) URBAN MACHINE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, TYLER <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94618	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) URBAN MACHINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 790/4629 Rpt: 793/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMPTON, TYLER <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94618	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) URBAN MACHINE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONANT, SANDRA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33102	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONATY, ANNE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONDON, JANE <hr/> Contributor address; City; State; Zip Code GREENWICH, CT 06831	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMEDIAN		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONDON, LINDA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60655	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) IBEW

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 791/4629 Rpt: 794/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONDOS, JOHN <hr/> 6 Contributor address; City; State; Zip Code LAKE CHARLES, LA 70605	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) CONSULTATION		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONE, RITA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONE, RITA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONE, RITA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONE, RITA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 792/4629 Rpt: 795/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONE, RITA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code MIDLAND, TX 79704		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONES, MARIAN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONKLE, MICHELLE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) PLANNING ANALYST		Employer (See Instructions) TXDOT
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONKLIN, BLANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664-4434		
Principal occupation / Job title (See Instructions) SR SYSTEMS ANALYST		Employer (See Instructions) UT SYSTEM
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONKLIN, BLANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664-4434		
Principal occupation / Job title (See Instructions) SR SYSTEMS ANALYST		Employer (See Instructions) UT SYSTEM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 793/4629 Rpt: 796/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONKLIN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97201	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONKLIN, ROBERT <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONKLIN, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77049	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONLAN, PETER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079-7131	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) CERTIFIED PUBLIC ACCOUNTANT		Employer (See Instructions) PETER V CONLAN, PC CPAS
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONLEY, JUDITH <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 794/4629 Rpt: 797/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONLEY, JUDITH <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHARMACIST		9 Employer (See Instructions) WALMART
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONLEY-HARVEY, CHERICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) KELSEY SEYBOLD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNELL, ANN <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNELL, BEN <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034-6637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNER, SHEILA <hr/> Contributor address; City; State; Zip Code FREEPORT, TX 77541	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 795/4629 Rpt: 798/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNER, SHEILA <hr/> 6 Contributor address; City; State; Zip Code FREEPORT, TX 77541	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNER, SHEILA <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77502	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNER, SHEILA <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNER, SHEILA <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77502	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNER, SHEILA <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 796/4629 Rpt: 799/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNERS, THERESA <hr/> 6 Contributor address; City; State; Zip Code CENTRALIA, WA 98531	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNOLLY, LEO <hr/> Contributor address; City; State; Zip Code LAGUNA NIGUEL, CA 92677	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNORS, CARRIE <hr/> Contributor address; City; State; Zip Code HUFFMAN, TX 77336	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) BAYOU CITY HOSPICE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNORS, TERESA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98121	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNORS, TERESA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98121	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 797/4629 Rpt: 800/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> 6 Contributor address; City; State; Zip Code OXFORD, OH 45056	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 798/4629 Rpt: 801/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> 6 Contributor address; City; State; Zip Code OXFORD, OH 45056	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CALVIN <hr/> Contributor address; City; State; Zip Code OXFORD, OH 45056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, GREG <hr/> Contributor address; City; State; Zip Code PETALUMA, CA 94954	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ETS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 799/4629 Rpt: 802/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, JAMES <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22301	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GENESIS 10
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GENESIS 10
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GENESIS 10
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GENESIS 10

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) GENESIS 10
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GENESIS 10
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SANDRA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GENESIS 10
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, SCOTT <hr/> Contributor address; City; State; Zip Code ST PETERSBURG, FL 33743	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ELDER CARE		Employer (See Instructions) SELF-EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, TAMMY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 801/4629 Rpt: 804/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, TAMMY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ROUND ROCK ISD
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, TAMMY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONRAD, TAMMY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONROY, SUSAN <hr/> Contributor address; City; State; Zip Code KNIGHTDALE, NC 27545	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONSOLVER, KAY ELLEN <hr/> Contributor address; City; State; Zip Code LITCHFIELD, CT 06759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 802/4629 Rpt: 805/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONSTANTINE, BETTY <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76017	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTARDO, JOSEPH <hr/> Contributor address; City; State; Zip Code DENVER, CO 80203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED MEDICAL SOCIAL WORKER		Employer (See Instructions) NONE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTARDO, NICOLINA <hr/> Contributor address; City; State; Zip Code HAMILTON SQUARE, NJ 08690	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) SOURCE4TEACHERS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTE, PETER <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98115	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTE, PETER <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 803/4629 Rpt: 806/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTRERAS, NORMA <hr/> 6 Contributor address; City; State; Zip Code ALAMEDA, CA 94501-1439	7 Amount of Contribution (\$) \$107.00
8 Principal occupation / Job title (See Instructions) MEDICAL EXAMINER INVESTIGATOR		9 Employer (See Instructions) SAN FRANCISCO COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTRERAS, REBECCA <hr/> Contributor address; City; State; Zip Code PLACENTIA, CA 92870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTRERAS, REBECCA <hr/> Contributor address; City; State; Zip Code PLACENTIA, CA 92870	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONTRERAS, REYES <hr/> Contributor address; City; State; Zip Code MERCED, CA 95341	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETAIL SALES		Employer (See Instructions) BIG CREEK LUMBER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONWAY, BARBARA <hr/> Contributor address; City; State; Zip Code NEW ULM, TX 78950	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 804/4629 Rpt: 807/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONWAY, TERESA <hr/> 6 Contributor address; City; State; Zip Code FRANKLIN, TN 37067	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 805/4629 Rpt: 808/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115		
8 Principal occupation / Job title (See Instructions) RESEARCHER		9 Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115		
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115		
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115		
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONYNGHAM, KAREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN TX, TX 78746-4115		
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 806/4629 Rpt: 809/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ADAM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 807/4629 Rpt: 810/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> 6 Contributor address; City; State; Zip Code SAVANNAH, TX 76227	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 808/4629 Rpt: 811/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, ANNICK <hr/> 6 Contributor address; City; State; Zip Code SAVANNAH, TX 76227	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, CHRISTI <hr/> Contributor address; City; State; Zip Code EVINGTON, VA 24550	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, CHRISTINA <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE		Employer (See Instructions) BOULDER COUNTY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, GRANT <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48113-0175	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, GRANT <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48113-0175	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 809/4629 Rpt: 812/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, JAMES	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723-3287		
8 Principal occupation / Job title (See Instructions) IT MANAGER		9 Employer (See Instructions) AUSTIN ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723-3287		
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) AUSTIN ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SPRINGFIELD, MO 65804		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, JEANNINE	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, MARK	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code MONTGOMERY, TX 77356		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 810/4629 Rpt: 813/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, MARK D <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$78.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, MARK D <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) UT
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, MOLLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ER NURSE		Employer (See Instructions) HOSPITAL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, SUSAN <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 811/4629 Rpt: 814/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, TERRY G 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		9 Employer (See Instructions) WILLIAMSON COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, TERRY G Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$570.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) WILLIAMSON COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, TERRY G Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) WILLIAMSON COUNTY
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, TERRY G Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) WILLIAMSON COUNTY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, TERRY G Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) WILLIAMSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 812/4629 Rpt: 815/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, TIM <hr/> 6 Contributor address; City; State; Zip Code JACUMBA HOT SPRINGS, CA 91934-2118	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK-HELLBERG, KAREN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOKE, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, KRISTEN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, KRISTEN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 813/4629 Rpt: 816/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code KELLER, TX 76244		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KELLER, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KELLER, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KELLER, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KELLER, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 814/4629 Rpt: 817/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76244	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOLEY, SANDRA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 815/4629 Rpt: 818/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COON, STACY <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COONEY, FRANK <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COONEY, FRANK <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COONEY, FRANK <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COONEY, FRANK <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 816/4629 Rpt: 819/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COONEY, FRANK <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CAROL <hr/> Contributor address; City; State; Zip Code CAUCASIAN, TX 75044	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TRAINING		Employer (See Instructions) CAROL COOPER
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CAROL <hr/> Contributor address; City; State; Zip Code CAUCASIAN, TX 75044	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TRAINING		Employer (See Instructions) CAROL COOPER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, ALICE P <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CARLA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 817/4629 Rpt: 820/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CARLA <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CAROL <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CAROL <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, CAROLYN E <hr/> Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JANE <hr/> Contributor address; City; State; Zip Code BELVEDERE TIBURON, CA 94920	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 818/4629 Rpt: 821/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JANE <hr/> 6 Contributor address; City; State; Zip Code BELVEDERE TIBURON, CA 94920	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JONATHAN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) FS3HODGES
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JONATHAN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) FS3HODGES
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, KAREN <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, KAREN <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 819/4629 Rpt: 822/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, KEVIN <hr/> 6 Contributor address; City; State; Zip Code COLUMBIA, MD 21044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) EDF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, KEVIN <hr/> Contributor address; City; State; Zip Code COLUMBIA, MD 21044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EDF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, KEVIN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) COPPELL COINS & CURRENCY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TECHNOLOGY CONSULTANT		Employer (See Instructions) MARK COOPER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, PAM <hr/> Contributor address; City; State; Zip Code TALLAHASSEE, FL 32308	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 820/4629 Rpt: 823/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, PEGGY <hr/> 6 Contributor address; City; State; Zip Code MARIETTA, GA 30062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, RALPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77090	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, SETH <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE ANALYST		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, SUSIE <hr/> Contributor address; City; State; Zip Code PERKINS, OK 74059	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, THOMAS <hr/> Contributor address; City; State; Zip Code GLENDALE, AZ 85302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) NATIONAL BANK OF ARIZONA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 821/4629 Rpt: 824/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76708-3743	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPE, LESTER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DEBORAH <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DEBORAH <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DEBORAH <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23112	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 822/4629 Rpt: 825/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DEBORAH	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23112		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DEBORAH	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23112		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DENNIS	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DENNIS	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, DENNIS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 823/4629 Rpt: 826/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77263	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 824/4629 Rpt: 827/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77263	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77263	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, SHARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASST		Employer (See Instructions) GCI TECHNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 825/4629 Rpt: 828/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, SHARON <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASST		9 Employer (See Instructions) GCI TECHNOLOGIES
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, THOMAS <hr/> Contributor address; City; State; Zip Code YOUNGSTOWN, OH 44509	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND, THOMAS <hr/> Contributor address; City; State; Zip Code YOUNGSTOWN, OH 44509	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPELAND-PARKER, ANTHONY <hr/> Contributor address; City; State; Zip Code ROSWELL, GA 30076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPAGE, D. <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 826/4629 Rpt: 829/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPAGE, D. <hr/> 6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76302	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPAGE, GAIL <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22304	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COPPOCK, KRISTEN <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORASH, KIM <hr/> Contributor address; City; State; Zip Code CORAL GABLES, FL 33146	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANGER		Employer (See Instructions) CAIN INTERNATIONAL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBETT, BEVERLY <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 827/4629 Rpt: 830/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBETT, JAMES <hr/> 6 Contributor address; City; State; Zip Code BRENHAM, TX 77833	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBETT, JAMES <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBETT, TERESA <hr/> Contributor address; City; State; Zip Code MONT BELVIEU, TX 77535-6816	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VESSEL OPERATIONS		Employer (See Instructions) CLARKSONS SHIPPING USA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBIN, SONJA <hr/> Contributor address; City; State; Zip Code MCKINNEY TX, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) UNIVERSITY LECTURER		Employer (See Instructions) LOCAL COLLEGE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBIN, SONJA <hr/> Contributor address; City; State; Zip Code MCKINNEY TX, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) UNIVERSITY LECTURER		Employer (See Instructions) LOCAL COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 828/4629 Rpt: 831/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORBY, ATHENA D <hr/> 6 Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORD, ERIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL EDUCATOR A		Employer (See Instructions) TRAVIS AUDUBON
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORD, ERIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL EDUCATOR A		Employer (See Instructions) TRAVIS AUDUBON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORDELL, BARBARA <hr/> Contributor address; City; State; Zip Code CARTHAGE, TX 75633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORDELL, BARBARA <hr/> Contributor address; City; State; Zip Code CARTHAGE, TX 75633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 829/4629 Rpt: 832/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORDER, GLORIA <hr/> 6 Contributor address; City; State; Zip Code BROCK, TX 76087	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORDER, GLORIA <hr/> Contributor address; City; State; Zip Code BROCK, TX 76087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COREY, CURT <hr/> Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23451	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORIA, ANA <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90808	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORLEY, DORIS <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 830/4629 Rpt: 833/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORMIER, MARY <hr/> 6 Contributor address; City; State; Zip Code TOMBALL, TX 77377	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ADMIN ASSISTANT		9 Employer (See Instructions) TEXAS POWER COATING
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNACOFF, REBECCA <hr/> Contributor address; City; State; Zip Code COLLEGEVILLE, PA 19426	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNEJO, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) MSCU
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNELIO, NATALIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TEXAS COURTS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNELIO, NATALIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TEXAS COURTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 831/4629 Rpt: 834/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNELIO, NATALIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77003	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) TEXAS COURTS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNELIUS, CHRISTINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) ELITE CHANGE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNELL, KELLY <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) FORT WORTH SYMPHONY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNELL, KELLY <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) FORT WORTH SYMPHONY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNSTUBBLE, DEWEY <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 832/4629 Rpt: 835/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNTER, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code LANGHORNE, PA 19047	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNTER, DEBORAH <hr/> Contributor address; City; State; Zip Code LANGHORNE, PA 19047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORNTER, DEBORAH <hr/> Contributor address; City; State; Zip Code LANGHORNE, PA 19047	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 833/4629 Rpt: 836/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORPORATION, PARSONS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77056	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) CONSULTING		9 Employer (See Instructions) PARSONS
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORPUZ, KAREN T <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRANSLATOR		Employer (See Instructions) KAREN CORPUZ
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORREIA, MITCHELL <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SERVER		Employer (See Instructions) N/A
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORRIGAN, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORRINGTON, SHARON <hr/> Contributor address; City; State; Zip Code COLLEGE STATIIN, TX 77845	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SIRIUS COMPUTER SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 834/4629 Rpt: 837/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORSA, AUDREY <hr/> 6 Contributor address; City; State; Zip Code SANTA MONICA, CA 90405	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORTELL, NINA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HAYNES BOONE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORTEZ, EDUARDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77001	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORTEZ, ANA <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORTINAS, DIANA <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 835/4629 Rpt: 838/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORTTE, SHARYN <hr/> 6 Contributor address; City; State; Zip Code BURNSVILLE, MN 55337	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) BOBALON CORP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORWIN, AMY <hr/> Contributor address; City; State; Zip Code SOUTH LONDONDERRY, VT 05155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORY, ELAINE <hr/> Contributor address; City; State; Zip Code N RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAW SCHOOL ACCOUNT MANAGER		Employer (See Instructions) WEST ACADEMIC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSKREY, VALERIE <hr/> Contributor address; City; State; Zip Code SWEENY, TX 77480	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSKREY, VALERIE <hr/> Contributor address; City; State; Zip Code SWEENY, TX 77480	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 836/4629 Rpt: 839/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSSEL, SANDI <hr/> 6 Contributor address; City; State; Zip Code ABITA SPRINGS, LA 70420-2102	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTA, BOB <hr/> Contributor address; City; State; Zip Code REIDSVILLE, NC 27320	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTAS, STEPHEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTE, SCOTT <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LUCIDWORKS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTE, SCOTT <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LUCIDWORKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 837/4629 Rpt: 840/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTE, SCOTT <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) LUCIDWORKS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTE, SCOTT <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LUCIDWORKS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTNER, ADAM <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43215	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEERING		Employer (See Instructions) FUSION ALLIANCE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTNER, ADAM <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43215	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEERING		Employer (See Instructions) FUSION ALLIANCE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTNER, ADAM <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43215	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEERING		Employer (See Instructions) FUSION ALLIANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 838/4629 Rpt: 841/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTER, JOHN <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PILOT		9 Employer (See Instructions) UNITED AIRLINES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTER, JOHN <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) UNITED AIRLINES
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTER, JOHN <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) UNITED AIRLINES
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTER, JOHN <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) UNITED AIRLINES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTER, JOHN <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) UNITED AIRLINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 839/4629 Rpt: 842/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTER, JOHN <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PILOT		9 Employer (See Instructions) UNITED AIRLINES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTRELL, DALE <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, VA 23112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) DLA-AVIATION DSCR
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTRELL, TRACY <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COACH/CONSULTANT		Employer (See Instructions) TRACY COTTRELL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COTTRELL, TRACY <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COACH/CONSULTANT		Employer (See Instructions) TRACY COTTRELL
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULEHAN, KATHY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) JUDSON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 840/4629 Rpt: 843/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULEHAN, KATHY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) JUDSON ISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULTER, BRENT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HELLO HEART
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULTER, KAREN <hr/> Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) SCHOOL THERAPY SERVICES
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COULTER, KAREN <hr/> Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) SCHOOL THERAPY SERVICES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUNCIL, TONY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TLC ENGINEERING INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 841/4629 Rpt: 844/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUNTERMAN, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTNEY, CAROLE <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTNEY, CAROLE <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTNEY, CAROLE <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTS, JOHN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLICE DETECTIVE		Employer (See Instructions) BEAUMONT PD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 842/4629 Rpt: 845/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTS, JOHN <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) POLICE DETECTIVE		9 Employer (See Instructions) BEAUMONT PD
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUTRADO, LINDA <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL SECRETARY		Employer (See Instructions) HEBINCK & ALTER
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUTRADO, LINDA <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL SECRETARY		Employer (See Instructions) HEBINCK & ALTER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVALESKI, VICTOR I <hr/> Contributor address; City; State; Zip Code HAYDENVILLE, MA 01039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 843/4629 Rpt: 846/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78717		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 844/4629 Rpt: 847/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	7 Amount of Contribution (\$) \$86.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78717		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COVAR, NANI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, AGGIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAVANNAH, GA 31406		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 845/4629 Rpt: 848/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, AGGIE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAVANNAH, GA 31406		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, CHARILYN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code MCLEAN, VA 22101		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, CHARILYN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code MCLEAN, VA 22101		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, WILLIAM	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, WILLIAM	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 846/4629 Rpt: 849/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWARD, THOMAS <hr/> 6 Contributor address; City; State; Zip Code PARIS, KY 40361	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) MAINTENANCE		9 Employer (See Instructions) UK FMMC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWDEN, CHRIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) ART GALLERY DIRECTOR		Employer (See Instructions) WOMEN & THEIR WORK
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWEN, MICHAEL <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) COWEN RODRIGUEZ PEACOCK
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWGILL, DONNETTE <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWGILL, DONNETTE <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 847/4629 Rpt: 850/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWGILL, DONNETTE <hr/> 6 Contributor address; City; State; Zip Code CADDO MILLS, TX 75135	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWGILL, DONNETTE <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWGILL, DONNETTE <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWGILL, DONNETTE <hr/> Contributor address; City; State; Zip Code CADDO MILLS, TX 75135	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWLISHAW, PATRICK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JACKSON WALKER LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 848/4629 Rpt: 851/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, ALLYSON	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code KELLER, TX 76248		
8 Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		9 Employer (See Instructions) KELLER ISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, ANGELA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) NON PROFIT		Employer (See Instructions) HOUSTON HABITAT
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, ANNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, BONNIE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SHERMAN, IL 62684		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CECELIA	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) RESOURCE CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 849/4629 Rpt: 852/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CHELSIE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76104	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CODY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) ST. MARY'S UNIVERSITY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CODY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) ST. MARY'S UNIVERSITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, DAVID <hr/> Contributor address; City; State; Zip Code MOVALLEY, IA 51555	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, DON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMMERCIAL REAL ESTATE		Employer (See Instructions) DON COX COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 850/4629 Rpt: 853/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JANET	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JOHN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, JUDGE JASON	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, KAREN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS DEPARTMENT OF LICENSING AND REGULATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, MARTIN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 851/4629 Rpt: 854/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, PAMELA <hr/> 6 Contributor address; City; State; Zip Code FRESNO, TX 77545	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, PAULA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, SHULER <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, SONDRRA <hr/> Contributor address; City; State; Zip Code FATE, TX 75189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR DIRECTOR		Employer (See Instructions) WILSON COMPANY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COY, BLAS <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 852/4629 Rpt: 855/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COYLE, CARRIE <hr/> 6 Contributor address; City; State; Zip Code BLUE GRASS, IA 52726	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COZAD, DAVIDE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRABTREE, CORNEL <hr/> Contributor address; City; State; Zip Code BRONX, NY 10471	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ETHICAL CULTURE FIELDSTON SCHOOL
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAFT, JACKSON <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) WELL FARGO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 853/4629 Rpt: 856/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, DAVID <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76116	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		9 Employer (See Instructions) WELL FARGO
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) WELL FARGO
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, GENEAN <hr/> Contributor address; City; State; Zip Code HOLLYWOOD, FL 33019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, LEILANI <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) QUALITY ANALYTIC REPORTING SPECIALIST		Employer (See Instructions) PEACEHEALTH
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, LEILANI <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) QUALITY ANALYTIC REPORTING SPECIALIST		Employer (See Instructions) PEACEHEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 854/4629 Rpt: 857/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, MARK	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78758-4760		
8 Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		9 Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, MARK	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758-4760		
Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, PAULA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code DALLAS, TX 75208		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, PAULA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75208		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, RANDALL	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 855/4629 Rpt: 858/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SILVER BLUE EVENTS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIN, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CRAIN BROGDON LLP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIN, WILLIAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SR. ACCOUNT MANAGER		Employer (See Instructions) BRENNTAG SOUTHWEST
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIN, WILLIAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SR. ACCOUNT MANAGER		Employer (See Instructions) BRENNTAG SOUTHWEST
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANDELL, WENDI <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 856/4629 Rpt: 859/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANDELL, WENDI	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANE, ERIC	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MEDFORD, NJ 08055		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) SUNCATCHER SOLAR INC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRANSHAW, DORIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRARY, JILL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92117		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRARY, JILL	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92117		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 857/4629 Rpt: 860/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRARY, JILL <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92117	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAVEDI, A PAUL <hr/> Contributor address; City; State; Zip Code WATERTOWN, MA 02472	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) NEWTON EXECUTIVE OFFICE CENTER
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAVEN, WESLEY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SIMPSON STRONG-TIE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAVENS, RICHIE <hr/> Contributor address; City; State; Zip Code MERTZON, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAVENS, RICHIE <hr/> Contributor address; City; State; Zip Code MERTZON, TX 76941	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 858/4629 Rpt: 861/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, BONNIE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code WACO, TX 76710		
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) TEXADA
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CHERYL	Amount of Contribution (\$) \$5.50
Contributor address; City; State; Zip Code LEWISVILLE, TX 75077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CHERYL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CHERYL	Amount of Contribution (\$) \$5.50
Contributor address; City; State; Zip Code LEWISVILLE, TX 75077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CHERYL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 859/4629 Rpt: 862/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CHRISTINA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77080-4001		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) HCA
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CHRISTINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77080-4001		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) HCA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CONSTANCE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79902		
Principal occupation / Job title (See Instructions) EL PASO COUNTY		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, CONSTANCE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79902		
Principal occupation / Job title (See Instructions) EL PASO COUNTY		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, GREG	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MACON, GA 31210		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 860/4629 Rpt: 863/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, GREG <hr/> 6 Contributor address; City; State; Zip Code MACON, GA 31210	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) DESIGNER		9 Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) UNIVERSITY OF TEXAS AT DALLAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, JULIE <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, JULIE <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, LEWIS <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) IUOE LOCAL 564

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 861/4629 Rpt: 864/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, LEWIS <hr/> 6 Contributor address; City; State; Zip Code ANGLETON, TX 77515	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OFFICE MANAGER		9 Employer (See Instructions) IUOE LOCAL 564
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, LORI <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) WEST MEMORIAL MUNICIPAL UTILITY DISTRICT
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, LORI <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) WEST MEMORIAL MUNICIPAL UTILITY DISTRICT
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, MARSHALL <hr/> Contributor address; City; State; Zip Code HOT SPRINGS, NC 28743	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) MERCHANT		Employer (See Instructions) EARTH GUILD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$2,024.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 862/4629 Rpt: 865/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, ROBERT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75244	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) THOMSONREUTERS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) THOMSONREUTERS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, VICTORIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) READING INTERVENTIONIST		Employer (See Instructions) SELF-EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREA, KATHLEEN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREA, KATHLEEN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 863/4629 Rpt: 866/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREA, KATHLEEN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREA, KATHLEEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREEL, JAMES	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code NORTH PLATTE, NE 69101		
Principal occupation / Job title (See Instructions) CONDUCTOR		Employer (See Instructions) UPRR
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREGAR, ELYSE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRENSHAW, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77015		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 864/4629 Rpt: 867/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRENSHAW, JAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77015	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRENSHAW, JAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) RETIRED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRENSHAW, JAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRENSHAW, JAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) RETIRED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRESON, TIMOTHY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ROAD CONSTRUCTION		Employer (See Instructions) TEXAS STERLING CONSTRUCTION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 865/4629 Rpt: 868/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREW, MATT <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76712	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) HGS SELF STORAGE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 866/4629 Rpt: 869/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ORGANIZER		9 Employer (See Instructions) SELF EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 867/4629 Rpt: 870/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, CHARLES	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521		
8 Principal occupation / Job title (See Instructions) ORGANIZER		9 Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREWS, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LOS RANCHOS, NM 87107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIADO, CRISTINA	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code DALLAS, TX 75299		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DUNAWAY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIDER, JULIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL CAMPO, TX 77437		
Principal occupation / Job title (See Instructions) MEDICAL WRITER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISS, DEBRA	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code HOUSTON, TX 77030		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 868/4629 Rpt: 871/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code SALADO, TX 76571	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) CRISS & ROUSSEAU LAW FIRM.L.L.P.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISS, SUSAN <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CRISS & ROUSSEAU LAW FIRM.L.L.P.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISS, SUSAN <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CRISS & ROUSSEAU LAW FIRM.L.L.P.
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISS, SUSAN <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CRISS & ROUSSEAU LAW FIRM.L.L.P.
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISS, SUSAN <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CRISS & ROUSSEAU LAW FIRM.L.L.P.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 869/4629 Rpt: 872/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIST, CANDACE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIST, CANDACE <hr/> Contributor address; City; State; Zip Code HITCHCOCK, TX 77563-2714	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIST, CANDACE <hr/> Contributor address; City; State; Zip Code HITCHCOCK, TX 77563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIST, CANDACE <hr/> Contributor address; City; State; Zip Code HITCHCOCK, TX 77563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIST, CANDACE <hr/> Contributor address; City; State; Zip Code HITCHCOCK, TX 77563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 870/4629 Rpt: 873/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIST, CANDACE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HITCHCOCK, TX 77563-2714		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISTOBAL, KATHERINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78726		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRISTOBAL, KATHERINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78726		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) UNIVERSITY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIXELL, GLORIA A.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) B.I.S.D.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIXELL, GLORIA A.	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) B.I.S.D.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 871/4629 Rpt: 874/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCHET, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code GRETNATERYTOWN, LA 70056	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCHET, CAROLYN <hr/> Contributor address; City; State; Zip Code GRETNATERYTOWN, LA 70056	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCHET, CAROLYN <hr/> Contributor address; City; State; Zip Code GRETNATERYTOWN, LA 70056	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCHET, CAROLYN <hr/> Contributor address; City; State; Zip Code GRETNATERYTOWN, LA 70056	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT, DAISY <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 872/4629 Rpt: 875/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT, DAISY <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77469	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT, MARGARET <hr/> Contributor address; City; State; Zip Code SAN LUIS OBISPO, CA 93405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROFT, CHERYL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROLL, MADELEINE <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRADUATE TEACHING ASSISTANT		Employer (See Instructions) UNIVERSITY OF TEXAS - RIO GRANDE VALLEY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROMWELL, COURTNEY <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 873/4629 Rpt: 876/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONE, TARA <hr/> 6 Contributor address; City; State; Zip Code PLACENTIA, CA 92870	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) KAISER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONIN, ABIGAIL <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33626	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) COLLIER
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONIN, SEAN <hr/> Contributor address; City; State; Zip Code BROWNSTOWN, MI 48183	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DHS		Employer (See Instructions) INSPECTOR
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONIN, SEAN <hr/> Contributor address; City; State; Zip Code BROWNSTOWN, MI 48183	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DHS		Employer (See Instructions) INSPECTOR
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONKITE, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78763	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 874/4629 Rpt: 877/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONKITE, KATHY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78763	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONKITE, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78763	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONBERG, SANDRA <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BALLET TEACHER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONSHEY, RICHARD <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONSHEY, RICHARD <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 875/4629 Rpt: 878/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRONSHEY, RICHARD <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSBY, GABRIEL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT VICE PRESIDENT		Employer (See Instructions) LAMAR UNIVERSITY
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSBY, GABRIEL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT VICE PRESIDENT		Employer (See Instructions) LAMAR UNIVERSITY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSON, CLAUDIA <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77502	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INTERPRETER		Employer (See Instructions) PASADENA ISD
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSS, JAMES <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 876/4629 Rpt: 879/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSS, JAMES <hr/> 6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSS, PATTY <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSS IV, RALPH <hr/> Contributor address; City; State; Zip Code GARDEN RIDGE, TX 78266	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSS IV, RALPH <hr/> Contributor address; City; State; Zip Code GARDEN RIDGE, TX 78266	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSSAN, BROOK <hr/> Contributor address; City; State; Zip Code COLTS NECK, NJ 07722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL ENGINEER		Employer (See Instructions) MEC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 877/4629 Rpt: 880/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSWELL, DEBBIE <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 85718	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LEGAL SUPPORT SERVICES		9 Employer (See Instructions) CROSWELL, P.C.
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROUCH, TERRI <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOCIAL MEDIA MANAGER		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROUCH, TERRI <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOCIAL MEDIA MANAGER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, CAROL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, CATHERINE <hr/> Contributor address; City; State; Zip Code ASHLAND, MA 01721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MOTHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 878/4629 Rpt: 881/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, NANCY <hr/> 6 Contributor address; City; State; Zip Code AVON, OH 44011	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, TRUDY <hr/> Contributor address; City; State; Zip Code LYMAN, SC 29365	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWDER, DANIEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWDER, RICHARD <hr/> Contributor address; City; State; Zip Code WEST, TX 76691	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWDER, RICHARD <hr/> Contributor address; City; State; Zip Code WEST, TX 76691	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 879/4629 Rpt: 882/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWDER, RICHARD	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code WEST, TX 76691		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code DAVIS, CA 95618		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code DAVIS, CA 95618		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DAVIS, CA 95618		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DAVIS, CA 95618		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 880/4629 Rpt: 883/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN <hr/> 6 Contributor address; City; State; Zip Code DAVIS, CA 95618	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JOHN <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JUDY <hr/> Contributor address; City; State; Zip Code BLUFF DALE, TX 76433	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINE ARTIST/PRIVATE CLASS TEACHER / I'M 72		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWE, JUDY <hr/> Contributor address; City; State; Zip Code BLUFF DALE, TX 76433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWLEY, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 881/4629 Rpt: 884/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWLEY, ANN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWLEY, JEAN <hr/> Contributor address; City; State; Zip Code OSWEGO, IL 60543	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWLEY-GALVIN, SUSAN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWNOVER, DIXIE A. <hr/> Contributor address; City; State; Zip Code BLAIRSVILLE, GA 30512	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROZIER, CHAD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) INDEPENDENT FINANCIAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 882/4629 Rpt: 885/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROZIER, MARY GENEVIEVE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDDEN, ALAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY <hr/> Contributor address; City; State; Zip Code AURORA, CO 80017	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY <hr/> Contributor address; City; State; Zip Code AURORA, CO 80017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY <hr/> Contributor address; City; State; Zip Code AURORA, CO 80017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 883/4629 Rpt: 886/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AURORA, CO 80017		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 884/4629 Rpt: 887/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AURORA, CO 80017		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUDER, PEGGY	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code AURORA, CO 80017		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUM, DOROTHY E	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WICHITA, KS 67226		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WICHITA STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 885/4629 Rpt: 888/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUM, JULIE <hr/> 6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMP, RUTH <hr/> Contributor address; City; State; Zip Code MADISON, WI 53705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMP, RUTH <hr/> Contributor address; City; State; Zip Code MADISON, WI 53705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPECKER, BRAD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ROBINSON CLAY INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPECKER, BRAD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ROBINSON CLAY INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 886/4629 Rpt: 889/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPECKER, BRAD <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75244	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) ROBINSON CLAY, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, ANA <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GOVT AFFAIRS		Employer (See Instructions) BALLARD PARTNERS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, BRENDA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, BRENDA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZ, ORLANDO <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ALUMINUM WHOLESALERS, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 887/4629 Rpt: 890/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZE, DAVID <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZEN, KATHRYN <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUZEN, KATHRYN <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$42.13
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUDDIHY, MARTHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUELLAR, DEANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR FOR OUTREACH		Employer (See Instructions) INSTITUTE FOR LOCAL SELF-RELIANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 888/4629 Rpt: 891/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUELLAR, DEANNE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR FOR OUTREACH		9 Employer (See Instructions) INSTITUTE FOR LOCAL SELF-RELIANCE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUELLAR, DEBORAH <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUI, HAITAO <hr/> Contributor address; City; State; Zip Code PROSPER, TX 75078	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) FOXX DEVELOPMENT INC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULBERTH, KELLYE <hr/> Contributor address; City; State; Zip Code MURPHY, TX 75094	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) APPLICATION DEV		Employer (See Instructions) COLLIN COLLEGE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLEN, JESSICA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESTAURANT OWNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 889/4629 Rpt: 892/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLEN, JESSICA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78749		
8 Principal occupation / Job title (See Instructions) RESTAURANT OWNER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLEN, PETER	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code LA, CA 90025		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLEN, SARAH	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTSMOUTH, NH 03801		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLERS, JUSTIN	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) PSYCHIATRIC NURSE PRACTITIONER		Employer (See Instructions) AUSTIN PSYCHCARE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLING, SARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PORTLAND, OR 97217		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) OHSU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 890/4629 Rpt: 893/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLINGFORD, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR OF ENGLISH		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLINGFORD, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR OF ENGLISH		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULLOM, JACQUELINE <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CITY OF SAN MARCOS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULMO, KATY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULVER, ADRIAN <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 891/4629 Rpt: 894/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULVER, ADRIAN <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CULVER, ADRIAN <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMBERBATCH, ASHTON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CHRISTIAN MINISTER / ATTORNEY		Employer (See Instructions) AGAPE CM / MCGINNIS LOCHRIDGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMBIE, STEPHEN <hr/> Contributor address; City; State; Zip Code VIENNA, VA 22182	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) NVCOMMERCIAL, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMBIE, STEPHEN <hr/> Contributor address; City; State; Zip Code VIENNA, VA 22182	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) NVCOMMERCIAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 892/4629 Rpt: 895/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, ALEX <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) NORTON ROSE FULBRIGHT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, BRUCE <hr/> Contributor address; City; State; Zip Code CATHEDRAL CITY, CA 92234-1605	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, MICHELLE <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513-5880	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CUMMINGS LAW PLLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, RICHARD <hr/> Contributor address; City; State; Zip Code PALM DESERT, CA 92260	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, SHARON <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 893/4629 Rpt: 896/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, SHARON <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, TERRY <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINGS, TERRY <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINS, BERA <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINS, CHRISTINA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) SCP HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 894/4629 Rpt: 897/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUMMINS, FRANKLIN <hr/> 6 Contributor address; City; State; Zip Code WICHITA, KS 67206	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) AEROSPACE ENGINEER		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNDIFF, WARREN <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNDIFF, WARREN <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, LESLIE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) (NONE)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, LESLIE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 895/4629 Rpt: 898/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, LOUANN <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, LOUANN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, LYNDA <hr/> Contributor address; City; State; Zip Code SEASIDE, CA 93955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DATABASE ADMINSTRATION		Employer (See Instructions) BANNER HEALTH
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, LYNDA <hr/> Contributor address; City; State; Zip Code SEASIDE, CA 93955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DATABASE ADMINSTRATION		Employer (See Instructions) BANNER HEALTH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, MARY <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) WINCHESTER MUSIC SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 896/4629 Rpt: 899/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, PATRICK <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 85706	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, RHONDA <hr/> Contributor address; City; State; Zip Code ADKINS, TX 78101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNNINGHAM, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNY, YVETTE <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95825	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUNY, YVETTE <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95825	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 897/4629 Rpt: 900/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUPPETT, TIM	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78756		
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURA, KRYSTAL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78238		
Principal occupation / Job title (See Instructions) HUMAN RESOURCES GENERALIST		Employer (See Instructions) CALREGIONAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURD, YOLANDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRAN, CHRISTOPHER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250		
Principal occupation / Job title (See Instructions) COMMISSIONED SECURITY		Employer (See Instructions) UNIVERSAL PROTECTION SERVICE, LP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRAN, DEBORAH	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SALEM, MA 01970		
Principal occupation / Job title (See Instructions) HOSPITAL ADMINISTRATION		Employer (See Instructions) BETH ISRAEL LAHEY HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 898/4629 Rpt: 901/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRIE, CARLTON	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77063		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRIE, JAIME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRIE, JAIME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRIE, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75206		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRY, DALE H	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGEVILLE, TX 78660-2104		
Principal occupation / Job title (See Instructions) ASSET MANAGER		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 899/4629 Rpt: 902/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRY, GREGG <hr/> 6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55108	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRY, GREGG <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRY, MARIDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77088	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURRY, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019-6032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GEOPHYSICIST		Employer (See Instructions) EXXONMOBIL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, CHRISTIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 900/4629 Rpt: 903/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, JANICE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) FIRSTCARE HEALTH PLAN
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, JANICE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) FIRSTCARE HEALTH PLAN
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, JANICE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) FIRSTCARE HEALTH PLAN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, JANICE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-2408	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ANALYSTS		Employer (See Instructions) BAYLOR SCOTT AND WHITE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, MARVIN <hr/> Contributor address; City; State; Zip Code GRANGER, IN 46530	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) INDIANA UNIVERSITY SOUTH BEND

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 901/4629 Rpt: 904/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTIS, SUSAN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTRIS, BRUCE <hr/> Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92646	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTS, JOANNA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) FINANCIAL SERVICES		Employer (See Instructions) FIDELITY INVEST
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTS, ROSEMARY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75211	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PUBLIC SCHOOL TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 902/4629 Rpt: 905/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTS, ROSEMARY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75211		
8 Principal occupation / Job title (See Instructions) PUBLIC SCHOOL TEACHER		9 Employer (See Instructions) DALLAS ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTS, ROSEMARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75211		
Principal occupation / Job title (See Instructions) PUBLIC SCHOOL TEACHER		Employer (See Instructions) DALLAS ISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUSHING, JOSEPH	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CRANBERRY TOWNSHIP, PA 16066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUSHMAN, BARBARA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KAILUA KONA, HI 96740		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUSTER, SUSANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOSTON, MA 02114		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 903/4629 Rpt: 906/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTLER, HOWARD	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code PORTLAND, OR 97212-1839		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTLER, HOWARD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTLAND, OR 97212-1839		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTLER, THOMAS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FEDERAL WAY, WA 98023		
Principal occupation / Job title (See Instructions) DRIVER		Employer (See Instructions) ENTERPRISE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTRONA, CHRISTINE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code LA QUINTA, CA 92253		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTRONA, CHRISTINE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code LA QUINTA, CA 92253		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 904/4629 Rpt: 907/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTRONA, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code LA QUINTA, CA 92253	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTRONA, CHRISTINE <hr/> Contributor address; City; State; Zip Code LA QUINTA, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTRONA, CHRISTINE <hr/> Contributor address; City; State; Zip Code LA QUINTA, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTSHALL, HANNAH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) INVESTMENTS		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTSHALL, HANNAH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) INVESTMENTS		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 905/4629 Rpt: 908/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTSHALL, HANNAH <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75219	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) INVESTMENTS		9 Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTER, TINA <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTER, TINA <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTING, LINDA <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) CANDLEWICK PRESS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTING, LINDA <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) CANDLEWICK PRESS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 906/4629 Rpt: 909/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTING, LINDA <hr/> 6 Contributor address; City; State; Zip Code BROOKLINE, MA 02446	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) AUTHOR		9 Employer (See Instructions) CANDLEWICK PRESS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTING, LINDA <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) CANDLEWICK PRESS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTING, LINDA <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) CANDLEWICK PRESS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTING, LINDA <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) CANDLEWICK PRESS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUTTLER, LILYAN <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93103	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 907/4629 Rpt: 910/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CVIK, CINDY <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SR. ADMINISTRATIVE ASST.		9 Employer (See Instructions) BANK OF NEW YORK MELLON
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CVIK, CINDY <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SR. ADMINISTRATIVE ASST.		Employer (See Instructions) BANK OF NEW YORK MELLON
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CYNTHIA R MAGUIRE, CYNTHIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK TX, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CYNTHIA R MAGUIRE, CYNTHIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK TX, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CYPRUS, ROCHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 908/4629 Rpt: 911/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CYRUS, LEO <hr/> 6 Contributor address; City; State; Zip Code BATON ROUGE, LA 70816	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) MINISTER		9 Employer (See Instructions) NEW HOPE BAPTIST CHURCH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D LEBEAU, MARVA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 909/4629 Rpt: 912/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 910/4629 Rpt: 913/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 911/4629 Rpt: 914/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 912/4629 Rpt: 915/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PINER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PRICE, NEIL <hr/> Contributor address; City; State; Zip Code LONDON, DC 20000	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARTNERSHIPS		Employer (See Instructions) GOOGLE UK
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D PRICE, NEIL <hr/> Contributor address; City; State; Zip Code LONDON, DC 20000	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARTNERSHIPS		Employer (See Instructions) GOOGLE UK
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'AMATO, SALLY <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 913/4629 Rpt: 916/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 914/4629 Rpt: 917/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ANCONA, AMY <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ORAZIO, JOANN <hr/> Contributor address; City; State; Zip Code QUEENS, NY 11691	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ORSIE, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77046	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ORSIE, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77046	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'ZURILLA, DEAN <hr/> Contributor address; City; State; Zip Code DOVER, NH 03820	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 915/4629 Rpt: 918/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DA VEIGA, NADA <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90064	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) VP SOLUTION ENGINEERING		9 Employer (See Instructions) NEW RELIC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DABDOUB, DAVID <hr/> Contributor address; City; State; Zip Code CENTENNIAL, CO 80015-3768	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR. LEAD, PROJECT MANAGEMENT		Employer (See Instructions) KYNDRYL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DABDOUB, DAVID <hr/> Contributor address; City; State; Zip Code CENTENNIAL, CO 80015-3768	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR. LEAD, PROJECT MANAGEMENT		Employer (See Instructions) KYNDRYL
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACAYO, LORI <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95831	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RESPIRATORY THERAPIST		Employer (See Instructions) SUTTER HEALTH
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACEY, DERIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMISSIONS ADVISOR		Employer (See Instructions) UNIVERSITY OF HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 916/4629 Rpt: 919/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACEY, DERIN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77011	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ADMISSIONS ADVISOR		9 Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACEY, DERIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMISSIONS ADVISOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAGLE, LOIS <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAI, YINGLU <hr/> Contributor address; City; State; Zip Code SEALY, TX 77474	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) CZT ENERGY USA INC.
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAI, YUAN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845-4899	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TAMU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 917/4629 Rpt: 920/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAIGLE, GENE <hr/> 6 Contributor address; City; State; Zip Code ALVIN, TX 77511	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SENIOR COMPASS ADJUSTER		9 Employer (See Instructions) MACKAY MARINE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAIGLE, SCOTT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC POLICY DIRECTOR		Employer (See Instructions) TEXAS COUNCIL FOR DEVELOPMENTAL DISABILITIES
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAIGLE, SCOTT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC POLICY DIRECTOR		Employer (See Instructions) TEXAS COUNCIL FOR DEVELOPMENTAL DISABILITIES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALE, LYNNE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) KELLER WILLIAMS REALTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, BRITT <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571-1053	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 918/4629 Rpt: 921/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, CAMI <hr/> 6 Contributor address; City; State; Zip Code ANCHORAGE, AK 99517	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALTON, RALPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GARRISON <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10039	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GINA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GINA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 919/4629 Rpt: 922/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GINA <hr/> 6 Contributor address; City; State; Zip Code LANTANA, TX 76226	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GINA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GINA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALY, GINA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMEWOOD, CHRISTIAN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) CENCORA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 920/4629 Rpt: 923/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, AVA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code EULESS, TX 76040		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) STUDENT
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, AVA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EULESS, TX 76040		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, AVA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EULESS, TX 76040		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, MEHROO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EULESS, TX 76040		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, MEHROO	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code EULESS, TX 76040		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 921/4629 Rpt: 924/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, MEHROO	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code EULESS, TX 76040		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, MEHROO	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code EULESS, TX 76040		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAMRI, MEHROO	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code EULESS, TX 76040		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANAHER, EILEEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PROGRAM SPECIALIST		Employer (See Instructions) DARS
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANAHER, EILEEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PROGRAM SPECIALIST		Employer (See Instructions) DARS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 922/4629 Rpt: 925/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANCY, BLAIR <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) CAIN & SKARNULIS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANE, ARDELL <hr/> Contributor address; City; State; Zip Code PALMDALE, CA 93551	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANFORTH, ELIZABETH <hr/> Contributor address; City; State; Zip Code BOZEMAN, MT 59715	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) MONTANA STATE UNIVERSITY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANFORTH, ELIZABETH <hr/> Contributor address; City; State; Zip Code BOZEMAN, MT 59715	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) MONTANA STATE UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANG, JACQUELINE <hr/> Contributor address; City; State; Zip Code MASON, TX 76856	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QUALITY ASSURANCE ANALYST		Employer (See Instructions) WELLS FARGO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 923/4629 Rpt: 926/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANG, KATHY <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION		Employer (See Instructions) TEXAS A&M COLLEGE OF MEDICINE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, DORIS T. <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, DORIS T. <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, JASON <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CFISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 924/4629 Rpt: 927/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, JOHN <hr/> 6 Contributor address; City; State; Zip Code ENCINO, CA 91436	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) MUSICIAN		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIEL, PAT <hr/> Contributor address; City; State; Zip Code PUTNEY, VT 05346	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, AL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244-7344	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AL DANIELS CONSTRUCTION, INC.
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, ANTHONY <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, AL 35810	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) POLICY MAKER		Employer (See Instructions) STATE OF ALABAMA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, D'ARWYN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 925/4629 Rpt: 928/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, DEBORA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, DERRICK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, JERALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATE EMPLOYEE		Employer (See Instructions) TX DEPT OF LICENSING AND REGULATION
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, JERALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STATE EMPLOYEE		Employer (See Instructions) TX DEPT OF LICENSING AND REGULATION
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, JERALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATE EMPLOYEE		Employer (See Instructions) TX DEPT OF LICENSING AND REGULATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 926/4629 Rpt: 929/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, MEGHAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GRANTS & CONTRACTS SPECIALIST		9 Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITINER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 927/4629 Rpt: 930/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITINER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY AND <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, NANCY AND <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 928/4629 Rpt: 931/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS, REBECCA <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELS-CURREY, ELIZABETH <hr/> Contributor address; City; State; Zip Code CHICO, CA 95973	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANIELSON, MARK <hr/> Contributor address; City; State; Zip Code PORTLANDTUCSON, OR 97212	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANILUK, JUDY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANILUK, JUDY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 929/4629 Rpt: 932/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANILUK, JUDY <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANILUK, JUDY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANKERS, LIZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HAYNES AND BOONE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANKERS, LIZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HAYNES AND BOONE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANKERS, LIZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HAYNES AND BOONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 930/4629 Rpt: 933/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANLEY, KATHLEEN AND MIKE <hr/> 6 Contributor address; City; State; Zip Code LA VERNE, CA 91750	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANLEY, KATHLEEN AND MIKE <hr/> Contributor address; City; State; Zip Code LA VERNE, CA 91750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANLEY, KATHLEEN AND MIKE <hr/> Contributor address; City; State; Zip Code LA VERNE, CA 91750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANLEY, KATHLEEN AND MIKE <hr/> Contributor address; City; State; Zip Code LA VERNE, CA 91750	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARBY, HELEN <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20905	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 931/4629 Rpt: 934/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARBY, HELEN <hr/> 6 Contributor address; City; State; Zip Code SILVER SPRING, MD 20905	7 Amount of Contribution (\$) \$1.15
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARCY, STEPHANIE <hr/> Contributor address; City; State; Zip Code FAIRFAX, CA 94930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) UNIVERSITY OF SAN FRANCISCO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARLEY, PRISCILLA <hr/> Contributor address; City; State; Zip Code ATHENS, GA 30605	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARLEY, PRISCILLA <hr/> Contributor address; City; State; Zip Code ATHENS, GA 30605	Amount of Contribution (\$) \$50.23
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARLEY, PRISCILLA <hr/> Contributor address; City; State; Zip Code ATHENS, GA 30605	Amount of Contribution (\$) \$50.23
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 932/4629 Rpt: 935/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARLING, CINDY & CCRAIG <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CUST SERVICE		9 Employer (See Instructions) PRIMO MICROPHONES, INC.
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARLING, CINDY & CCRAIG <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUST SERVICE		Employer (See Instructions) PRIMO MICROPHONES, INC.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARMER, KAREN <hr/> Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) PRIVATE PRACTICE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARR, JO ANN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARR, MARCUS <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 933/4629 Rpt: 936/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
8 Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		9 Employer (See Instructions) STAFFLINK, INC
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		Employer (See Instructions) STAFFLINK, INC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		Employer (See Instructions) STAFFLINK, INC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		Employer (See Instructions) STAFFLINK, INC
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		Employer (See Instructions) STAFFLINK, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 934/4629 Rpt: 937/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
8 Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		9 Employer (See Instructions) STAFFLINK, INC
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARRAH, GLENN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025-4543		
Principal occupation / Job title (See Instructions) ECONOMIC ANALYST		Employer (See Instructions) STAFFLINK, INC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARROUGH, DIANE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARROUZET, JENNIFER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) USTUDIO
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARROUZET, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) USTUDIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 935/4629 Rpt: 938/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARROUZET, JENNIFER	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78759		
8 Principal occupation / Job title (See Instructions) SOFTWARE		9 Employer (See Instructions) USTUDIO
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARTON, ZOILA	Amount of Contribution (\$) \$54.00
Contributor address; City; State; Zip Code LAUREL, NY 11948		
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) WORD CREATIVE, LLC
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DASGUPTA, ANSHU	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) QUALCOMM
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DASGUPTA, ANSHU	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) QUALCOMM
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUERTY, BARBARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148-2806		
Principal occupation / Job title (See Instructions) PHYSICIAN ASSOCIATE		Employer (See Instructions) ARTHUR NAGEL COMMUNITY CLINIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 936/4629 Rpt: 939/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUERTY, BARBARAL <hr/> 6 Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN ASSOCIATE		9 Employer (See Instructions) NAGEL COMMUNITY CLINIC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUERTY, BARBARAL <hr/> Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSOCIATE		Employer (See Instructions) NAGEL COMMUNITY CLINIC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUGHERTY, CAROL <hr/> Contributor address; City; State; Zip Code NORTH HOLLYWOOD, CA 91606	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) NUESTRA CLINIC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUGHETY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUGHTERS, TURPEN <hr/> Contributor address; City; State; Zip Code SUN CITY, AZ 85351	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 937/4629 Rpt: 940/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAUM, LORALEIGH <hr/> 6 Contributor address; City; State; Zip Code TOMBALL, TX 77377	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) PRODUCT DIRECTOR		9 Employer (See Instructions) TOP DOWN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVALT, ANNA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSOCIATE		Employer (See Instructions) ROUND ROCK ISD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVENPORT, KAREN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVERN, EILEEN <hr/> Contributor address; City; State; Zip Code NO CITY PROVIDED, TX 78705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVEY, JEFF <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30078	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 938/4629 Rpt: 941/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVEY, JEFF <hr/> 6 Contributor address; City; State; Zip Code SNELLVILLE, GA 30078	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVEY, JEFFREY <hr/> Contributor address; City; State; Zip Code JEFFERSON, GA 30549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVEY, JEFFREY <hr/> Contributor address; City; State; Zip Code JEFFERSON, GA 30549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVEY, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) VYNCKIER
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, CHRISTY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ANTIQUE DEALER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 939/4629 Rpt: 942/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, CHRISTY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ANTIQUE DEALER		9 Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, IAN <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HOSPITALITY		Employer (See Instructions) HOLIDAY INN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, SALOMON <hr/> Contributor address; City; State; Zip Code FREDERICK, MD 21702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, SALOMON <hr/> Contributor address; City; State; Zip Code FREDERICK, MD 21702	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, GREG <hr/> Contributor address; City; State; Zip Code REDONDO BEACH, CA 90278	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) AEROSPACE MANAGER		Employer (See Instructions) NORTHROP GRUMMAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 940/4629 Rpt: 943/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, JERAMIE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PARAMEDIC		9 Employer (See Instructions) CITY OF FORT WORTH
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, LILIANE <hr/> Contributor address; City; State; Zip Code STUDIO CITY, CA 91604	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, LILIANE <hr/> Contributor address; City; State; Zip Code STUDIO CITY, CA 91604	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, LOGAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LEGISLATIVE DIRECTOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, ROGER <hr/> Contributor address; City; State; Zip Code OAKTON, VA 22124-2344	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FOOD MANUFACTURER		Employer (See Instructions) MAGI FOODS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 941/4629 Rpt: 944/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, SUZETTE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) CITY OF GEORGETOWN
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIDSON, SUZETTE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY OF GEORGETOWN
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIES, DONNA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIES, SHANNON <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIES, SHANNON <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 942/4629 Rpt: 945/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIES, STEVENSON <hr/> 6 Contributor address; City; State; Zip Code MERRIMAC, MA 01860-1857	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVILA, JUAN <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVILA, MARTHA <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVILA, REBECCA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLATE, TX 75077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) RETIRED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVILA, REBECCA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLATE, TX 75077	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 943/4629 Rpt: 946/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> 6 Contributor address; City; State; Zip Code NYC, NY 10023	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 944/4629 Rpt: 947/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> 6 Contributor address; City; State; Zip Code NYC, NY 10023	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ABIGAIL <hr/> Contributor address; City; State; Zip Code NYC, NY 10023	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ALANA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ALBERT <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 945/4629 Rpt: 948/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ALBERT <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75006	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ALBERT <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ALBERT <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAMERON <hr/> Contributor address; City; State; Zip Code ATASCOCITA, TX 77346	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DESIGN ENGINEER		Employer (See Instructions) PENTAIR
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAMERON <hr/> Contributor address; City; State; Zip Code ATASCOCITA, TX 77346	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DESIGN ENGINEER		Employer (See Instructions) PENTAIR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 946/4629 Rpt: 949/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAMERON	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ATASCOCITA, TX 77346		
8 Principal occupation / Job title (See Instructions) DESIGN ENGINEER		9 Employer (See Instructions) PENTAIR
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAMERON	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ATASCOCITA, TX 77346		
Principal occupation / Job title (See Instructions) DESIGN ENGINEER		Employer (See Instructions) PENTAIR
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CANAAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78751		
Principal occupation / Job title (See Instructions) DIRECTOR OF SOFTWARE ENGINEERING		Employer (See Instructions) CAREERPLUG
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CARL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAROLYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KEENE, TX 76059		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 947/4629 Rpt: 950/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75709	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAROLYN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAROLYN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CAROLYN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CASSIE <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) WILDCREEK CUSTOM RENOVATIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 948/4629 Rpt: 951/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CATHY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CHET/NANCY <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CHET/NANCY <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, CMICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BRIAN WHITE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DANIEL <hr/> Contributor address; City; State; Zip Code MEDFORD, OR 97504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 949/4629 Rpt: 952/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DANIEL <hr/> 6 Contributor address; City; State; Zip Code MEDFORD, OR 97504	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DESIREE <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) WPP
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DEVRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DEVRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DEVRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 950/4629 Rpt: 953/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DEVRA <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20002	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DEVRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DEVRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DOMINIQUE <hr/> Contributor address; City; State; Zip Code SHENANDOAH, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CULTIVOTE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, DORIS <hr/> Contributor address; City; State; Zip Code CLEVELAND, TX 77327	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 951/4629 Rpt: 954/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ERIN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) FORESTER		9 Employer (See Instructions) TEXAS A&M FOREST SERVICE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ERIN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FORESTER		Employer (See Instructions) TEXAS A&M FOREST SERVICE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, ERWIN <hr/> Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, FRANK <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF CINCINNATI
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, GISELLE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$4.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 952/4629 Rpt: 955/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, HEATHER <hr/> 6 Contributor address; City; State; Zip Code CENTENNIAL, CO 80112	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MUSIC TEACHER		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JAKE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FIELD ORGANIZER		Employer (See Instructions) TEXAS DEMOCRATIC PARTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JAKE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FIELD DIRECTOR		Employer (See Instructions) TDP
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JAKE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FIELD ORGANIZER		Employer (See Instructions) TEXAS DEMOCRATIC PARTY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JENNIFER <hr/> Contributor address; City; State; Zip Code MALAKOFF, TX 75148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 953/4629 Rpt: 956/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JOH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JOH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JOH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JOHN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BELLINGHAM, WA 98229		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KATHLEEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 954/4629 Rpt: 957/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KATHRYN <hr/> Contributor address; City; State; Zip Code UNIVERSITY PARK, TX 75205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) DOJ
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KELLI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLIENT SERVICES		Employer (See Instructions) GAINWELL TECH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KIMBERLEY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) KIMBERLEY DAVIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 955/4629 Rpt: 958/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KYLE <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT SAN ANTONIO
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KYLE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) UNIVERSITY OF TEXAS AT SAN ANTONIO
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, LARRY <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, LARRY <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, LARRY <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 956/4629 Rpt: 959/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, LARRY <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75401	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, LARRY <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MARISA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNER		Employer (See Instructions) CBS STUDIOS
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MARISA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNER		Employer (See Instructions) CBS STUDIOS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MARTHA ALGENITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 957/4629 Rpt: 960/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MARY FRAN <hr/> 6 Contributor address; City; State; Zip Code HOPKINSVILLE, KY 42240	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) MARY FRAN DAVIS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MASHA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MAUREEN <hr/> Contributor address; City; State; Zip Code HOLLYWOOD, FL 33021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, PAMELA JOUBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, PATRICIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 958/4629 Rpt: 961/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, PATRICIA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78727		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PALO ALTO, CA 94301		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, PERNELL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) CONGRESSIONAL AID		Employer (See Instructions) UNITED STATES HOUSE OF REPRESENTATIVES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, RACHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, RACHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 959/4629 Rpt: 962/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, REIKO <hr/> 6 Contributor address; City; State; Zip Code HONOLULU, HI 96826	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) BANK OF HAWAII
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, REIKO <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96826	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) BANK OF HAWAII
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SAM <hr/> Contributor address; City; State; Zip Code BOZEMAN, MT 59715	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BRIDGER AEROSPACE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SAMANTHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77231	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUVENILE DETENTION JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SHARON <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 960/4629 Rpt: 963/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SHERYL <hr/> 6 Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, SHERYL <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, STEWART <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNOLOGY TRANSFER		Employer (See Instructions) THE TEXAS A&M UNIVERSITY SYSTEM
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, STEWART <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNOLOGY TRANSFER		Employer (See Instructions) THE TEXAS A&M UNIVERSITY SYSTEM
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, TAMARA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) ENERGY HEALING		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 961/4629 Rpt: 964/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, TAMARA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79936	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) ENERGY HEALING		9 Employer (See Instructions) SELF EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, WENDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FOUNDER/PUBLIC SPEAKER		Employer (See Instructions) DEEDS NOT WORDS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVISON, LINDA <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVISON, LINDA <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVISON, LINDA <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 962/4629 Rpt: 965/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVISON, MARCIA <hr/> 6 Contributor address; City; State; Zip Code SOUTH PORTLAND, ME 04106	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWES, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWES, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$53.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWES, JANET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, CHRISTINA M <hr/> Contributor address; City; State; Zip Code VASHON, WA 98070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 963/4629 Rpt: 966/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, ELIZABETH	7 Amount of Contribution (\$) \$12.00
6 Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) UTSW
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, ELIZABETH	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UTSW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, GREGORY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240		
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) WELLS FARGO
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, JANET	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, JANET	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 964/4629 Rpt: 967/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAWSON, LESLIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) CONSULTANT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAY, DANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAY, GAIL <hr/> Contributor address; City; State; Zip Code NOVATO, CA 94945	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAY, WENDY <hr/> Contributor address; City; State; Zip Code PASCO, WA 99301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) VALLEY DENTAL ARTS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE BEN, C <hr/> Contributor address; City; State; Zip Code NYC, NY 10009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 965/4629 Rpt: 968/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE GRASSI, ALEX <hr/> 6 Contributor address; City; State; Zip Code REDWOOD VALLEY, CA 95470	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MUSICIAN		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE JONG, ASHLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746-5333	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) ATX CASAS, LLC
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE JONG, ASHLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE JONG, ASHLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, CARLOS <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78541	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) UTRGV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 966/4629 Rpt: 969/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, CARLOS <hr/> 6 Contributor address; City; State; Zip Code EDINBURG, TX 78541	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) UTRGV
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, SANDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, SANDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, SANDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA CRUZ, SANDY <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 967/4629 Rpt: 970/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA RIVA, BARBARA <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77433	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) GREAT AMERICAN BUSINESS PRODUCT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA ROSA, ERIKA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) POLICY FELLOW		Employer (See Instructions) LEADERSHIP FOR EDUCATIONAL EQUITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA TORRE, AIDA <hr/> Contributor address; City; State; Zip Code MANTECA, CA 95337	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LA TORRE, AIDA <hr/> Contributor address; City; State; Zip Code MANTECA, CA 95337	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LOS SANTOS, RENATO <hr/> Contributor address; City; State; Zip Code DUNCANVILLE, TX 75137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONPROFIT AGENCY DIRECTOR		Employer (See Instructions) LNE SC, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 968/4629 Rpt: 971/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LOS SANTOS, RENATO <hr/> 6 Contributor address; City; State; Zip Code DUNCANVILLE, TX 75137	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NONPROFIT AGENCY DIRECTOR		9 Employer (See Instructions) LNESC, INC.
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE LUNA, ALISA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NON-PROFIT DIRECTOR		Employer (See Instructions) VOLUNTEER LEGAL SERVICES OF CENTRAL TEXAS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE ROCH, THIERRY <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE ROCH, THIERRY <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE VRIES, BARBARA <hr/> Contributor address; City; State; Zip Code MILFORD, PA 18337	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 969/4629 Rpt: 972/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEADRICK, MICHAEL	7 Amount of Contribution (\$) \$1,024.00
6 Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85258		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAGAN, TRACY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAGAN, TRACY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAKINS, JENNIFER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code IRVING, TX 75063		
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) UNIV OF HOUSTON
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAL, JODERA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
Principal occupation / Job title (See Instructions) FRONT DESK MANAGER		Employer (See Instructions) MCM ELEGANTE HOTEL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 970/4629 Rpt: 973/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAL, JODERA	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
8 Principal occupation / Job title (See Instructions) FRONT DESK MANAGER		9 Employer (See Instructions) MCM ELEGANTE HOTEL
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, CAROL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77059		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, LINDA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BLOOMINGTON, IN 47403-2818		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, LINDA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BLOOMINGTON, IN 47403-2818		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, LINDA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BLOOMINGTON, IN 47403-2818		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 971/4629 Rpt: 974/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, LINDA <hr/> 6 Contributor address; City; State; Zip Code BLOOMINGTON, IN 47403-2818	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PAMELA <hr/> Contributor address; City; State; Zip Code ROSHARON, TX 77583	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, PATRICIA <hr/> Contributor address; City; State; Zip Code IMPERIAL, MO 63052	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, SHERI <hr/> Contributor address; City; State; Zip Code SOUTH HAMILTON, MA 01982	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN, SHERI <hr/> Contributor address; City; State; Zip Code SOUTH HAMILTON, MA 01982	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 972/4629 Rpt: 975/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN-JONES, LESLEY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UT AUSTIN
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEAN-JONES, LESLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT AUSTIN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEARMAN, MELINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEARMAN, MELINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEBEAUVOIR, DANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) COUNTY CLERK		Employer (See Instructions) TRAVIS COUNYT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 973/4629 Rpt: 976/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEBNAM, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75201	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) DEBNAMRUST
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECASTRO, JOHN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECKARD, DARLA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79493	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECKARD, LANCE <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79493	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECKER, ALAN <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 974/4629 Rpt: 977/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECKER, E RADFORD <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECOUX, BEVERLEE <hr/> Contributor address; City; State; Zip Code ALAMO, TX 78516	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECOUX, BEVERLEE <hr/> Contributor address; City; State; Zip Code ALAMO, TX 78516	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEDERICH, RUTH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEDERICH, RUTH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 975/4629 Rpt: 978/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEESE, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092-3856	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFABRIZIO, NICK <hr/> Contributor address; City; State; Zip Code AUGUSTA, NJ 07822	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CIT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFLUITER, STEPHEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFLUITER, STEPHEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFRANCO, BEATRICE <hr/> Contributor address; City; State; Zip Code BERWYN, IL 60402	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 976/4629 Rpt: 979/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFRANCO, BEATRICE <hr/> 6 Contributor address; City; State; Zip Code BERWYN, IL 60402	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFREES, JOHN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		Employer (See Instructions) TECHNICAL AND SCIENTIFIC APPLICATIONS, INC.
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFREES, JOHN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		Employer (See Instructions) TECHNICAL AND SCIENTIFIC APPLICATIONS, INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEGARMO, JESSICA <hr/> Contributor address; City; State; Zip Code ENCINITAS, CA 92024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEGENHART, JOY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JAMES REY ATTORNEY AT LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 977/4629 Rpt: 980/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEGOLYER, EVERETT 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731-2015	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PRIVATE INVESTOR		9 Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEGRAFFENRIED, LES Contributor address; City; State; Zip Code ALPINE, TX 79830	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) U.S. DIPLOMAT		Employer (See Instructions) U.S. DEPARTMENT OF STATE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEGROOT, ALBERT Contributor address; City; State; Zip Code HAMILTON, MA 01982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEHART, DALTON Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEHOYOS, ROSEMARIE Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 978/4629 Rpt: 981/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEITCHMAN, LORRAINE <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEITCHMAN, LORRAINE <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEITCHMAN, LORRAINE <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEITCHMAN, LORRAINE <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEJEAR, MARVIN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 979/4629 Rpt: 982/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEJESUS, MELISSA <hr/> 6 Contributor address; City; State; Zip Code SALEM, MA 01970	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) NEWGLOBE EDUCATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEKEISER-MOULTON, KARYN <hr/> Contributor address; City; State; Zip Code GREENVILLE, MI 48838	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEKEISER-MOULTON, KARYN <hr/> Contributor address; City; State; Zip Code GREENVILLE, MI 48838	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEKTOR, LISA <hr/> Contributor address; City; State; Zip Code TEMPE, AZ 85283	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GILBERT PUBLIC SCHOOLS
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEL CID, JENNIFER <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) STYLIST		Employer (See Instructions) JENNIFER DEL CID

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 980/4629 Rpt: 983/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEL RIO, ALICIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) TEXAS HOUSE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEL TORO, ALMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BLUE BULL ENERGY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELAMAR, ANGELA <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578-2785	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELAMAR, ANGELA <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578-2785	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELANEY, CAROLINE <hr/> Contributor address; City; State; Zip Code DAYVILLE, CT 06241	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 981/4629 Rpt: 984/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELANEY, CAROLINE	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code DAYVILLE, CT 06241		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELANEY, SUZANN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WINDBER, PA 15963		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELAURIER, SONI	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) HAIRDRESER		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELEON, STACY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code BRYAN, TX 77801		
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) TEXAS A&M
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELEY, DAVID	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code GOLETA, CA 93117		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RAYTHEON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 982/4629 Rpt: 985/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SENIOR RESEARCH ASSISTANT		9 Employer (See Instructions) TEXAS BIOMEDICAL RESEARCH INSTITUTE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IACUC REGULATORY SPECIALIST		Employer (See Instructions) UT AUSTIN
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IACUC REGULATORY SPECIALIST		Employer (See Instructions) UT AUSTIN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, JOE <hr/> Contributor address; City; State; Zip Code MILLSAPMILLSAP, TX 76066	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, JOSEPH L <hr/> Contributor address; City; State; Zip Code BISBEE, AZ 85603-4428	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 983/4629 Rpt: 986/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, JOSEPH L	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code BISBEE, AZ 85603-4428		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, MARIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77011		
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) HARRIS COUNTY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, MARTHA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77011		
Principal occupation / Job title (See Instructions) NUTRITION SERVICES		Employer (See Instructions) HOUSTON ISD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELGADO, MICHAEL	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LAREDO, TX 78041		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELIA, RET	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTLAND, OR 97239		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 984/4629 Rpt: 987/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELINE, STEVEN	7 Amount of Contribution (\$) \$26.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELINE, STEVEN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELINE, STEVEN	Amount of Contribution (\$) \$628.69
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELINE, STEVEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELINE, STEVEN	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 985/4629 Rpt: 988/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELINE, STEVEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELL, ELIZABETH <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BAYLOR
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELL, MARCI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELL, MARCI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELL'ANTONIO, ANDREW <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) THE UNIVERSITY OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 986/4629 Rpt: 989/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELL'ANTONIO, ANDREW <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) THE UNIVERSITY OF TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELLAMURA, JOANNE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109-2626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELLAMURA, JOANNE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109-2626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELLAMURA, JOANNE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109-2626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELLAMURA, JOANNE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109-2626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 987/4629 Rpt: 990/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELOACH, ALLISON	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77023		
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELOACH, ALVIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ROSHARON, TX 77583		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELONG, DAVID	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code GRAHAM, TX 76450		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELONG, DAVID	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code GRAHAM, TX 76450		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELORME, JOHN	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76006		
Principal occupation / Job title (See Instructions) AE III		Employer (See Instructions) TWC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 988/4629 Rpt: 991/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELORME, JOHN <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76006	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) AE III		9 Employer (See Instructions) TWC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELSARTE, JEA <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30309	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) MOM CONSULTANTS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DELVE, ROBERT <hr/> Contributor address; City; State; Zip Code LA GRANDE, OR 97850	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMAND, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737-4525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DEVELOPMENT		Employer (See Instructions) THE FOUNDATION FOR PRADER-WILLI RESEARCH
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMARCO, JAMIE <hr/> Contributor address; City; State; Zip Code COLLEGE PARK, MD 20740	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) CHESAPEAKE CLIMATE ACTION NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 989/4629 Rpt: 992/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMARCO, JAMIE <hr/> 6 Contributor address; City; State; Zip Code COLLEGE PARK, MD 20740	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LOBBYIST		9 Employer (See Instructions) CHESAPEAKE CLIMATE ACTION NETWORK
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMATES, LAUREN <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR ASSOCIATE		Employer (See Instructions) PWC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMERATH, JANELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMETRIADES, HOPE <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER/ EDUCATOR/ARTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMETRIOS, EAMES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 990/4629 Rpt: 993/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMETRIOS, EAMES <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMLER, ROBERT <hr/> Contributor address; City; State; Zip Code SONOMA, CA 95476	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMM, STEPHEN <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23219	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HUNTON ANDREWS KURTH
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMOSS, JOSHUA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76309	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) HYPOWER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMOSS, MARGARET <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 991/4629 Rpt: 994/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMOSS, MARGARET <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEMOSS, MEGAN <hr/> Contributor address; City; State; Zip Code SPARTANBURG, SC 29306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) LAND DEVELOPER
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENG, JUN <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FINANCE PROFESSIONAL		Employer (See Instructions) FORTIVE CORPORATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENIS, CHRISTIAN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11217	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions) DANDY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENLINGER, GLEN <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22932	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 992/4629 Rpt: 995/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEHY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75402	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COLLEGE ADMINISTRATOR		9 Employer (See Instructions) BROOKHAVEN COLLEGE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEHY, MICHAEL <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COLLEGE ADMINISTRATOR		Employer (See Instructions) BROOKHAVEN COLLEGE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEY, DENNIS <hr/> Contributor address; City; State; Zip Code LEES SUMMIT, MO 64064	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEY, PAMELA <hr/> Contributor address; City; State; Zip Code CLIFTON, TX 76634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEY, PAMELA <hr/> Contributor address; City; State; Zip Code CLIFTON, TX 76634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 993/4629 Rpt: 996/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEY, PAMELA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code CLIFTON, TX 76634		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEY, PAMELA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CLIFTON, TX 76634		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNEY, PAULA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75208		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PARKLAND HEALTH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, CHRISTOPHER	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MILLSBORO, DE 19966		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, CHRISTOPHER	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MILLSBORO, DE 19966		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 994/4629 Rpt: 997/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, JAMES <hr/> 6 Contributor address; City; State; Zip Code SEABROOK, TX 77586	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, LARISSA <hr/> Contributor address; City; State; Zip Code SANTA CLARITA, CA 91350	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) NETFLIX
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, MICHAEL <hr/> Contributor address; City; State; Zip Code SAND LAKE, MI 49343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, SUSAN <hr/> Contributor address; City; State; Zip Code MILLSBORO, DE 19966	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, WAYNETTA <hr/> Contributor address; City; State; Zip Code RED OAK, TX 75154	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HEALTHCARE IT ANALYST		Employer (See Instructions) PRIME HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 995/4629 Rpt: 998/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, WAYNETTA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code RED OAK, TX 75154		
8 Principal occupation / Job title (See Instructions) HEALTHCARE IT ANALYST		9 Employer (See Instructions) PRIME HEALTHCARE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNIS, WAYNETTA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RED OAK, TX 75154		
Principal occupation / Job title (See Instructions) HEALTHCARE IT ANALYST		Employer (See Instructions) PRIME HEALTHCARE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENNY, MELBA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HUTTO, TX 78634-3464		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSMAN, KELSEY	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79424		
Principal occupation / Job title (See Instructions) PHARMACY TECHNICIAN		Employer (See Instructions) SHALLOWATER PHARMACY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSMAN, KELSEY	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79424		
Principal occupation / Job title (See Instructions) PHARMACY TECHNICIAN		Employer (See Instructions) SHALLOWATER PHARMACY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 996/4629 Rpt: 999/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSON, JANE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) FINANCE MANAGER		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSON, JANE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SR ADMIN ASSOC		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSON, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENSON, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENT, SHARON <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MD ANDERSON CANCER CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 997/4629 Rpt: 1000/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENTON, ANN <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DENTON, GRANT <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNT DIRECTOR		Employer (See Instructions) WEBMECHANIX
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEOLALIKAR, AVINASH <hr/> Contributor address; City; State; Zip Code BETHESDA, MD 20816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		Employer (See Instructions) AT&T
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEPEW, DAVID <hr/> Contributor address; City; State; Zip Code MEADOW VISTA, CA 95722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEPEW, SARAH <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-7202	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 998/4629 Rpt: 1001/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEPPE, JOAN <hr/> 6 Contributor address; City; State; Zip Code VILLAGE OF NAGOG WOODS, MA 01718	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERAIMO, JOY <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) POLK COUNTY RD & BRIDGE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERANEY, MARILYN <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERANEY, MARILYN <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERENGOWSKI, ANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ZAPIER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 999/4629 Rpt: 1002/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERENGOWSKI, ANNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) ZAPIER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEREWITZ, JOYCE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEREWITZ, JOYCE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERRIG, JAMES <hr/> Contributor address; City; State; Zip Code GLENDALE, AZ 85308-8300	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DERUBEIS, ANGELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NETWORK ENGINEER		Employer (See Instructions) ZIONS MANAGEMENT SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1000/4629 Rpt: 1003/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESAI, NIMISH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77018	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) LIEFF CABRASER HEIMANN & BERNSTEIN LLP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESAI, PARESH <hr/> Contributor address; City; State; Zip Code GREER, SC 29651	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) TOBACCO PLUS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESAI, PARESH <hr/> Contributor address; City; State; Zip Code GREER, SC 29651	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) TOBACCO PLUS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESAI, PARESH <hr/> Contributor address; City; State; Zip Code GREER, SC 29651	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) TOBACCO PLUS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESAI, PARUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) ARC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1001/4629 Rpt: 1004/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESGROSEILLIER, PATRICIA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SEATTLE, WA 98125		
8 Principal occupation / Job title (See Instructions) CASHIER		9 Employer (See Instructions) TARGET
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESGROSEILLIER, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98125		
Principal occupation / Job title (See Instructions) CASHIER		Employer (See Instructions) TARGET
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESHMUKH, KANCHAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BETHESDA, MD 20814		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESHOTEL, JOSEPH	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESHOTEL, JOSEPH	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1002/4629 Rpt: 1005/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESILVA, ANGELA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESJARDINS, RICHARD <hr/> Contributor address; City; State; Zip Code TITUSVILLE, FL 32780	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESJARDINS, RICHARD <hr/> Contributor address; City; State; Zip Code TITUSVILLE, FL 32780	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESOUZA, DARRELL <hr/> Contributor address; City; State; Zip Code SUISUN, CA 94585-3215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RECREATIONAL AID		Employer (See Instructions) DEPARTMENT OF AIRFORCE - NAF FINANCIAL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESSER, ARNA <hr/> Contributor address; City; State; Zip Code REISTERSTOWN, MD 21136	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1003/4629 Rpt: 1006/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DESSER, ARNA <hr/> 6 Contributor address; City; State; Zip Code REISTERSTOWN, MD 21136	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DETLET, KATHLEEN <hr/> Contributor address; City; State; Zip Code CHATHAM TOWNSHIP, NJ 07928	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CO-DIRECTOR SPIRITUAL CENTER		Employer (See Instructions) CALDWELL DOMINICANS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEUTSCHER, DAVID <hr/> Contributor address; City; State; Zip Code LAFAYETTE, CA 94549	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVENDORF, TIFFANI ANN <hr/> Contributor address; City; State; Zip Code OCEANSIDE, CA 92057-8211	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVENDORF, TIFFANI ANN <hr/> Contributor address; City; State; Zip Code OCEANSIDE, CA 92057-8211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1004/4629 Rpt: 1007/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVINCENT, ELISE <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19111	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVORE, MICHAEL <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60540	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVORE, ROSALIE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVORE, ROSALIE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEVRIES, CHRISTINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1005/4629 Rpt: 1008/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEW, GLORIA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEW, H.	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEW YORK, NY 10002		
Principal occupation / Job title (See Instructions) FILM PROGRAMMER		Employer (See Instructions) IFC CENTER
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEWAR, MADELEINE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEWAR, MADELEINE	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEWAR, MADELEINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) POLITICAL ACTIVIST		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1006/4629 Rpt: 1009/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEWEES, VERNA <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STAT, TX 77845	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEWITT, VALDA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAL, JANET <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77378	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMENT, CYNTHIA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SPEECH-LANGUAGE PATHOLOGIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMOND, ELYSSA LYNNE <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1007/4629 Rpt: 1010/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMONDSTONE, KENNETH <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11217	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LOW/MODERATE INCOME HOUSING		9 Employer (See Instructions) SELF KENNETH DIAMONDSTONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAZ, AGUSTIN <hr/> Contributor address; City; State; Zip Code MILTON, NY 12020	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAZ, REYNALDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ACCIDENT INJURY ATTORNEY PC		Employer (See Instructions) REYNALDO DIAZ
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAZ, REYNALDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ACCIDENT INJURY ATTORNEY		Employer (See Instructions) REYNALDO DIAZ ACCIDENT INJURY ATTORNEY PC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAZ, SYLVIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1008/4629 Rpt: 1011/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAZ-CUEVAS, TERESITA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) FREDERICKS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIBERARDINIS, MARISA <hr/> Contributor address; City; State; Zip Code DERRY, NH 03038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) BAE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIBERARDINIS, MARISA <hr/> Contributor address; City; State; Zip Code DERRY, NH 03038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) BAE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIBRELL, LAURI <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ANICO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIBRELL, LAURI <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ANICO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1009/4629 Rpt: 1012/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICARA, SUE <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79924	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICARA, SUE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICARLO, JOSEPH <hr/> Contributor address; City; State; Zip Code WEST BERLIN, NJ 08091	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICICCIO, RAY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, CA 92078	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) THE FELLOWSHIP CENTER
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKENS, MICHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MARKET REAEARCH		Employer (See Instructions) KANTAR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1010/4629 Rpt: 1013/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKENSON, GAIL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKEY, HELEN <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKHERBER, COURTNEY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) RECKITT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKINSON, ELAINE <hr/> Contributor address; City; State; Zip Code HARWICH, MA 02645	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKINSON, REV. JORDAN <hr/> Contributor address; City; State; Zip Code DORSET VT, VT 05251	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1011/4629 Rpt: 1014/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKMAN, BARBARA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAINT MARYS, GA 31558		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKSON, CASSANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORTLAND, OR 97229		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKSON, CASSANDRA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PORTLAND, OR 97229		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKSON, CASSANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORTLAND, OR 97229		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKSON, ERIC	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77095		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1012/4629 Rpt: 1015/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKSON, KALVIN <hr/> 6 Contributor address; City; State; Zip Code PORT ST LUCIE, FL 34953	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DICKSON, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIDERICH, RON <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIDLAKE, WILLIAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF WILLIAM DIDLAKE, P.C.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIDLAKE, WILLIAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF WILLIAM DIDLAKE, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1013/4629 Rpt: 1016/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEBOLD, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code ARGYLE, TX 76226	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEBOLD, ELIZABETH <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEBOLD, ELIZABETH <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEBOLD, ELIZABETH <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEDRICHS, ROBERT <hr/> Contributor address; City; State; Zip Code CEDAR FALLS, IA 50613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1014/4629 Rpt: 1017/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, BARBARA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, BARBARA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004-4832	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004-4832	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004-4832	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1015/4629 Rpt: 1018/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, DAVID <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004-4832	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, ROBERT <hr/> Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33410	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEKE, PHILLIP <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLERGY		Employer (See Instructions) AUSTIN SEMINARY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIENGER, PATRICK <hr/> Contributor address; City; State; Zip Code WINONA, MN 55987	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) LA CROSSE COUNTY HA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIERKER, AARTI <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1016/4629 Rpt: 1019/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code LOS GATOS, CA 95032	7 Amount of Contribution (\$) \$524.00
8 Principal occupation / Job title (See Instructions) SW ENGINEER		9 Employer (See Instructions) GOOGLE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, INNA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, INNA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, JAY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, JAY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1017/4629 Rpt: 1020/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIFIORE, ROBERT <hr/> 6 Contributor address; City; State; Zip Code RALEIGH, NC 27615-1202	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIGGS, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DIGGS & SADLER
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIGGS, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DIGGS & SADLER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIGGS, JAMES <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32810	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIIORIO, ELENA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1018/4629 Rpt: 1021/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIIORIO, ELENA <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIKELSKY, ALEXANDER <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98121	Amount of Contribution (\$) \$6.96
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) BAYER AG
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIKELSKY, ALEXANDER <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98121	Amount of Contribution (\$) \$5.80
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) BAYER AG
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILEO, TRACY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIMITED PARTNER		Employer (See Instructions) KILLAM COMPANY
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILL, DONNA <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) EXTRACO BANKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1019/4629 Rpt: 1022/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILL, DONNA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BANKER		9 Employer (See Instructions) EXTRACO BANKS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILL, STACY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLARD, DEBORAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLARD, DEBORAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLARD, DEBORAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1020/4629 Rpt: 1023/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLARD, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLMAN, BRUCE <hr/> Contributor address; City; State; Zip Code OVERLAND PARK, KS 66204	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLMAN, DAVID <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79601	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLMAN, DAVID <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79601	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLMAN, DAVID <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79601	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1021/4629 Rpt: 1024/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLMAN, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75252	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLON, CHRISTINE <hr/> Contributor address; City; State; Zip Code SAN BRUNO, CA 94066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLON, JAMES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLON, JAMES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90027	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLON, KAREN <hr/> Contributor address; City; State; Zip Code SMITH RIVER, CA 95567	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1022/4629 Rpt: 1025/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLS, LINDSAY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILLS, LINDSAY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DILMAR, SAMUEL	Amount of Contribution (\$) \$101.20
Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548		
Principal occupation / Job title (See Instructions) TAX EXAMINER		Employer (See Instructions) INTERNAL REVENUE SERVICE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIMALANTA, ANGELA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LAS VEGAS, NV 89144		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CCSD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIMESTICO, STEVE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LAGUNA WOODS, CA 92637		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1023/4629 Rpt: 1026/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIMONSON, LINDA <hr/> 6 Contributor address; City; State; Zip Code BOWIE, MD 20715	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINARDO, CLAUDIA AND BERNARD <hr/> Contributor address; City; State; Zip Code ERIE, PA 16506	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINATALE, KATHLEEN <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINDA, JOEL <hr/> Contributor address; City; State; Zip Code MULLIKEN, MI 48861	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINEEN, GERALDINE <hr/> Contributor address; City; State; Zip Code ASHFORD, CT 06278	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) REGIONAL SCHOOL DISTRICT 8

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1024/4629 Rpt: 1027/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINGESS, JAMES <hr/> 6 Contributor address; City; State; Zip Code BOULDER CITY, NV 89005	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PILOT		9 Employer (See Instructions) UNITED AIRLINES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINH, HOANG <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92603	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GOLF INSTRUCTOR		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINI, ANDREA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) MICHELMAN & ROBINSON LLP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINNEEN, NICK <hr/> Contributor address; City; State; Zip Code WINDCREST, TX 78239-2652	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINNEEN, NICK <hr/> Contributor address; City; State; Zip Code WINDCREST, TX 78239-2652	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1025/4629 Rpt: 1028/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DINNEEN, NICK <hr/> 6 Contributor address; City; State; Zip Code WINDCREST, TX 78239-2652	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DION, SHANNON <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DION, SHANNON <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DION, SHANNON <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOP, KADIATA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE IMPLEMENTATION SPECIALIST		Employer (See Instructions) MIRUS RESTAURANT SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1026/4629 Rpt: 1029/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOP, KADIATA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SOFTWARE IMPLEMENTATION SPECIALIST		9 Employer (See Instructions) MIRUS RESTAURANT SOLUTIONS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1027/4629 Rpt: 1030/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) CENTILLION
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIOT, DEBORAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTILLION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIQUISTO, CHERYL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95118		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1028/4629 Rpt: 1031/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DISALVO, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76010	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CSR		9 Employer (See Instructions) DXP ENTERPRISES
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DISALVO, KATHLEEN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CSR		Employer (See Instructions) DXP ENTERPRISES
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DISALVO, KATHLEEN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CSR		Employer (See Instructions) DXP ENTERPRISES
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DISON, ANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) UT AUSTIN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DISTELRATH, SANDRA <hr/> Contributor address; City; State; Zip Code NEW BEDFORD, MA 02744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1029/4629 Rpt: 1032/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITOMASO, NANCY <hr/> 6 Contributor address; City; State; Zip Code FANWOOD, NJ 07023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		9 Employer (See Instructions) RUTGERS UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITRI, JANE <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34207	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITRI, JANE <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34207	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITTMAN, JULIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DITTMAN, JULIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1030/4629 Rpt: 1033/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIX, REBECCA <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) OFFICE OF CHILD SAFETY/DFPS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIX, REBECCA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) OFFICE OF CHILD SAFETY/DFPS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIX, REBECCA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) OFFICE OF CHILD SAFETY/DFPS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXLER, KEVIN <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF KEVIN L. DIXLER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXLER, KEVIN <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF KEVIN L. DIXLER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1031/4629 Rpt: 1034/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXLER, KEVIN <hr/> 6 Contributor address; City; State; Zip Code DEERFIELD, IL 60015	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICE OF KEVIN L. DIXLER
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXON, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXON, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXON, JOYCE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75372	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXON, JOYCE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75372	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1032/4629 Rpt: 1035/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXON, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code ROANOKE, TX 76262	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIXON, MICHAEL <hr/> Contributor address; City; State; Zip Code ROANOKE, TX 76262	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOAN, DAVID K <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBERSTEIN, RHETT <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBERSTEIN, RHETT <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1033/4629 Rpt: 1036/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBERSTEIN, RHETT <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) IT CONSULTANT		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBERTIN, LESLIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97211	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBINS, LARRY D <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBINS, LARRY D <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBINS, LARRY D <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1034/4629 Rpt: 1037/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBINS, LARRY D <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBERVICH, MARY JANE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBERVICH, MARY JANE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBERVICH, MARY JANE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBIE, SUSAN <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1035/4629 Rpt: 1038/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBKINS, STEVE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBSON, KAREN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code WACO, TX 76712		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBSON, LYNNE	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746-5341		
Principal occupation / Job title (See Instructions) BUSINESS OWNER PHILANTHROPIST		Employer (See Instructions) LYNNE DOBSON
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBSON, ROBIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PATHGROUP
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBSON, ROBIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PATHGROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1036/4629 Rpt: 1039/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOCHEN, SANDY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOCHEN, SANDY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODD, KATHRYN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NORTHLAKE, TX 76247		
Principal occupation / Job title (See Instructions) ESTIMATOR		Employer (See Instructions) TEXOP CONSTRUCTION
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODD, KATHRYN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NORTHLAKE, TX 76247		
Principal occupation / Job title (See Instructions) ESTIMATOR		Employer (See Instructions) TEXOP CONSTRUCTION
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODD, KATHRYN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NORTHLAKE, TX 76247		
Principal occupation / Job title (See Instructions) ESTIMATOR		Employer (See Instructions) TEXOP CONSTRUCTION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1037/4629 Rpt: 1040/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODD, SUSAN <hr/> 6 Contributor address; City; State; Zip Code CAYUCOS, CA 93430	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODDS, DEBRA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WORSHIP COORDINATOR		Employer (See Instructions) ST. JULIAN OF NORWICH EPISCOPAL CHURCH
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODGE, KRISTIE <hr/> Contributor address; City; State; Zip Code BEDFORD, MA 01730-1009	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) THE DODGE COMPANY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODGE, SANDRA <hr/> Contributor address; City; State; Zip Code NAVAJO, NM 87328	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DODSON, MICHAEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1038/4629 Rpt: 1041/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOE, JENNIE <hr/> 6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CPA, CFE		9 Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOERR, DAVID <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOHERTY, RICHARD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208-3623	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLINGER, YSRAELYA <hr/> Contributor address; City; State; Zip Code FELTON, CA 95018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SUTTER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLL, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1039/4629 Rpt: 1042/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLL, SHIRLEY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAN JOSE, CA 95123-5338		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLLAR, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) ASSISTANT DEAN, SCHOOL OF HEALTH PROFESSIONS		Employer (See Instructions) UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER SAN
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLLAR, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) ASSISTANT DEAN, SCHOOL OF HEALTH PROFESSIONS		Employer (See Instructions) UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER SAN
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLLAR, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) ASSISTANT DEAN, SCHOOL OF HEALTH PROFESSIONS		Employer (See Instructions) UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER SAN
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOLLAR, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) ASSISTANT DEAN, SCHOOL OF HEALTH PROFESSIONS		Employer (See Instructions) UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER SAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1040/4629 Rpt: 1043/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUE, SANDRA <hr/> 6 Contributor address; City; State; Zip Code BUCKEYE, AZ 85396	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUEZ, FRANCISCO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUEZ, JOANNA <hr/> Contributor address; City; State; Zip Code SANTA MARIA, CA 93455	Amount of Contribution (\$) \$111.00
Principal occupation / Job title (See Instructions) DIRECTOR OF RESOURCE DEVELOPMENT		Employer (See Instructions) PEOPLES SELF HELP HOUSING
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUEZ, NIEVES <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUEZ, NIEVES <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33626	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1041/4629 Rpt: 1044/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINGUEZ, NIEVES	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TAMPA, FL 33626		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMINICK, LESLIE	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMITEAUX, L	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMITEAUX, L	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAGHEY, TANYA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) FRANKLIN UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1042/4629 Rpt: 1045/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHO, KATE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PRINCIPAL, STRATEGY		9 Employer (See Instructions) THE HONOR ROLL
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHO, KATE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PRINCIPAL, STRATEGY		Employer (See Instructions) THE HONOR ROLL
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, PAUL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11233-1804	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) METLIFE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, PAUL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11233-1804	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) METLIFE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		Employer (See Instructions) TEACHER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1043/4629 Rpt: 1046/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		9 Employer (See Instructions) TEACHER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		Employer (See Instructions) TEACHER
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		Employer (See Instructions) TEACHER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1044/4629 Rpt: 1047/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		9 Employer (See Instructions) TEACHER
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		Employer (See Instructions) TEACHER
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONAHUE, ROBERT <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) JESUIT COLLEGE PREPARATORY SCHOOL		Employer (See Instructions) TEACHER
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONALD, STACEY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) DEVRY UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1045/4629 Rpt: 1048/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONALD, STACEY <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) DEVRY UNIVERSITY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONATH, JEFF <hr/> Contributor address; City; State; Zip Code WALNUT, CA 91789	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SCPMG
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONATH, JEFF <hr/> Contributor address; City; State; Zip Code WALNUT, CA 91789	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SCPMG
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONMOYER, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) MARKETING CONSULTANT		Employer (See Instructions) WIZARD OF ADS ADAM DONMOYER LTD.
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNELLY, ALEXANDER <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENTERTAINMENT		Employer (See Instructions) PRG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1046/4629 Rpt: 1049/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNELLY, ALEXANDER <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10023	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ENTERTAINMENT		9 Employer (See Instructions) PRG
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNELLY, CANDICE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNELLY, CLAIRE <hr/> Contributor address; City; State; Zip Code FREDERICK, MD 21701	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SHELTER MANAGER		Employer (See Instructions) BEYOND SHELTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNENFIELD, LARRY <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85260	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) LADCO
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONNET, CECILIA <hr/> Contributor address; City; State; Zip Code MANVILLE, NJ 08835	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HOUSEKEEPER		Employer (See Instructions) HIGGINS HOME FOR FUNERALS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1047/4629 Rpt: 1050/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOHUE, JOHN <hr/> 6 Contributor address; City; State; Zip Code NORTH ATTLEBORO, MA 02760	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOHUE, JOHN <hr/> Contributor address; City; State; Zip Code NORTH ATTLEBORO, MA 02760	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, AMY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PET SITTER		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, AMY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PET SITTER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, ANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1048/4629 Rpt: 1051/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, CAROL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$5,300.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, CAROL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, CAROL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONOVAN, CAROL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOODY, DAVE <hr/> Contributor address; City; State; Zip Code ALTADENA, CA 91001	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DECLINE TO STATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1049/4629 Rpt: 1052/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, PAUL <hr/> 6 Contributor address; City; State; Zip Code BURBANK, CA 91505	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$178.57
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1050/4629 Rpt: 1053/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code BURBANK, CA 91505		
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) WINIFRED DOOLEY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOLEY, WINIFRED	Amount of Contribution (\$) \$56.83
Contributor address; City; State; Zip Code BURBANK, CA 91505		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) WINIFRED DOOLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1051/4629 Rpt: 1054/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOZAN, LOUISE	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code BAKERSFIELD, CA 93309		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOOZAN, LOUISE	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code BAKERSFIELD, CA 93309		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORAN, JIM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ISLAMORADA, FL 33036		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORAN, JUDITH	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) JUDITH DORAN
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORAN, MARY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code BURNET, TX 78611-5434		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1052/4629 Rpt: 1055/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORAN, MARY <hr/> 6 Contributor address; City; State; Zip Code BURNET, TX 78611-5434	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOROHOVICH, JAMES <hr/> Contributor address; City; State; Zip Code RED BANK, NJ 07701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CLIENT SERVICE SUPERVISOR		Employer (See Instructions) PAYCHEX
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORSETT, AVERILL <hr/> Contributor address; City; State; Zip Code MIAMI SHORES, FL 33150-2228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY/ADMINISTRATOR		Employer (See Instructions) BROWARD COUNTY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORSEY, LINDEE <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER'S AIDE		Employer (See Instructions) UTAH STATE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORSEY, SCHUWAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1053/4629 Rpt: 1056/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORSEY, SCHUWAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77071		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORSEY, SCHUWAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77071		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DORTA, OSCAR	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code PLANTATION, FL 33317		
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSCHER, DAVID	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) POLYCOM
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSCHER, DAVID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) POLYCOM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1054/4629 Rpt: 1057/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSCHER, DAVID <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		9 Employer (See Instructions) POLYCOM
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSSIERE, KEITH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) JPMORGAN
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSSIERE, KEITH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) JPMORGAN
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSTALIYEVA, KRISTINA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025-2651	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TRAINER/VP		Employer (See Instructions) JPMC
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSTALIYEVA, KRISTINA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025-2651	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TRAINER/VP		Employer (See Instructions) JPMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1055/4629 Rpt: 1058/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSTIS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code WATERBURY CENTER, VT 05677	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSTIS, ROBERT <hr/> Contributor address; City; State; Zip Code WATERBURY CENTER, VT 05677	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOTSON, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) ACCESSHEALTH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOTY, MARK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOTY, REV. DR. MARK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1056/4629 Rpt: 1059/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOTY, REV. DR. MARK <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOTY, REV. DR. MARK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUB, JANE <hr/> Contributor address; City; State; Zip Code KIRKWOOD, MO 63122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUB, JANE <hr/> Contributor address; City; State; Zip Code KIRKWOOD, MO 63122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUB, JANE <hr/> Contributor address; City; State; Zip Code KIRKWOOD, MO 63122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1057/4629 Rpt: 1060/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGHERTY, JIM & JUDY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEYS		9 Employer (See Instructions) DOUGHERTY & DOUGHERTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGHERTY, SHAUN <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGHERTY, SHAUN <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, CYNTHIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, CYNTHIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1058/4629 Rpt: 1061/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, GRAHAM	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77002		
8 Principal occupation / Job title (See Instructions) ENTERPRISE ACCOUNT EXECUTIVE		9 Employer (See Instructions) T-MOBILE BUSINESS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, LISA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) CHAPLAIN		Employer (See Instructions) FLETCHER SEMINARY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, SUSAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) CHAPLAIN		Employer (See Instructions) FLETCHER SEMINARY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, SUSAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) CHAPLAIN		Employer (See Instructions) FLETCHER SEMINARY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1059/4629 Rpt: 1062/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) CHAPLAIN		9 Employer (See Instructions) FLETCHER SEMINARY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUGLAS, THERESA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT ADMIN		Employer (See Instructions) TRAINOR COMMERCIAL CONSTRUCTION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUSMAN, STEVE <hr/> Contributor address; City; State; Zip Code FELTON, CA 95018	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOW, RICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOW, RICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1060/4629 Rpt: 1063/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWDEY, DIANE <hr/> 6 Contributor address; City; State; Zip Code CROCKETT, TX 75835	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) SAM HOUSTON STATE UNIVERSITY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWDEY, DIANE <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SAM HOUSTON STATE UNIVERSITY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWDEY, DIANE <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SAM HOUSTON STATE UNIVERSITY
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWDEY, DIANE <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SAM HOUSTON STATE UNIVERSITY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWDY, BILLIE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77342	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1061/4629 Rpt: 1064/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWDY, BILLIE <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77342	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWER, LYNDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWLING, TOM <hr/> Contributor address; City; State; Zip Code BOYCE, VA 22620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWLING, TOM <hr/> Contributor address; City; State; Zip Code BOYCE, VA 22620	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNEY, JOHN <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1062/4629 Rpt: 1065/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNEY, MELISSA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) CBRE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNEY, PATTY <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85711	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNING, KATHRYN A <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$13.77
Principal occupation / Job title (See Instructions) MENTAL HEALTH PROFESSIONAL		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNING, NANCY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNTHSC
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNING, THOMAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1063/4629 Rpt: 1066/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNING, THOMAS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748-3087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNS, GLORIA <hr/> Contributor address; City; State; Zip Code LAUREL, MD 20723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOWNS, KRISTEN <hr/> Contributor address; City; State; Zip Code CARRBORO, NC 27510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NC DEPT OF ENVIRONMENTAL QUALITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOXEY, REBECCA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOXEY, REBECCA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1064/4629 Rpt: 1067/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOXEY, REBECCA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77003	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, EARNEST <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SAFETY ADVISOR		Employer (See Instructions) EXXONMOBIL
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, EARNEST <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SAFETY ADVISOR		Employer (See Instructions) EXXONMOBIL
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, J K <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) LEANDER ISD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, J K <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1065/4629 Rpt: 1068/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, J K <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$20.20
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) LEANDER ISD
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, JOSEPH <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701-5221	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, JOSEPH <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701-5221	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, JOYCE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, JOYCE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1066/4629 Rpt: 1069/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, JOYCE <hr/> 6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, LIAM <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$1,024.00
Principal occupation / Job title (See Instructions) SOFTWARE EXEC		Employer (See Instructions) SALESFORCE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, SUSAN <hr/> Contributor address; City; State; Zip Code INDUSTRY, PA 15052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, SUSAN <hr/> Contributor address; City; State; Zip Code INDUSTRY, PA 15052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DR COOPER, MICHAEL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) THE CHURCH OF I AM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1067/4629 Rpt: 1070/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DR COOPER, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PASTOR		9 Employer (See Instructions) THE CHURCH OF I AM
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRABLOS, KELLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, DANIEL <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, JACK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, JILL <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1068/4629 Rpt: 1071/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, JILL <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, KIM <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55414	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAPER, PAMELA <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40515	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CLARK COUNTY SCHOOLS, KY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAPER, PAMELA <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40515	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CLARK COUNTY SCHOOLS, KY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAZNER, LAURIE <hr/> Contributor address; City; State; Zip Code DALLAA, TX 75225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1069/4629 Rpt: 1072/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAZNER, LAURIE <hr/> 6 Contributor address; City; State; Zip Code DALLAA, TX 75225	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESBACK, DENETTE <hr/> Contributor address; City; State; Zip Code MERIDIAN, ID 83646	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PM		Employer (See Instructions) CSI
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESCHER, WILLIAM <hr/> Contributor address; City; State; Zip Code MASON, MI 48854	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESKIN, HELENE <hr/> Contributor address; City; State; Zip Code LIVINGSTON, NJ 07039	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESKIN, HELENE <hr/> Contributor address; City; State; Zip Code LIVINGSTON, NJ 07039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1070/4629 Rpt: 1073/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESSER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code FOLSOM, CA 95630	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) STATE OF CALIFORNIA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESSLER, DON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESSLER, DON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESSLER, DON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESSLER, DON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1071/4629 Rpt: 1074/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRESSLER, DON <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DREYER, BRUCE GARY <hr/> Contributor address; City; State; Zip Code OAK CREEK, WI 53154	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RECREATION WORKER		Employer (See Instructions) MPS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRINNAN, CHARLES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISCOLL, PATTY <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISCOLL, VIC <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1072/4629 Rpt: 1075/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, CYNTHIA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, CYNTHIA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, CYNTHIA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, CYNTHIA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1073/4629 Rpt: 1076/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, LINDA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, LINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, LINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRISKILL, LINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUCKER, DIANA <hr/> Contributor address; City; State; Zip Code ITHACA, NY 14850	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1074/4629 Rpt: 1077/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUCKER, DIANA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ITHACA, NY 14850		
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, JAMES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JAMES DRUMMOND LAW FIRM, PLLC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, JAMES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JAMES DRUMMOND LAW FIRM, PLLC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRYBURGH, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) KARATE TEACHER		Employer (See Instructions) POWERKENPO INC.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRYBURGH, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) KARATE TEACHER		Employer (See Instructions) POWERKENPO INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1075/4629 Rpt: 1078/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU, HELEN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$700.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) HELEN DU
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU PONT, ANNE LLOYD <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESTORATION ARTIST/MASON, ALTERNATIVE HEALING		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU PONT, ANNE LLOYD <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESTORATION ARTIST/MASON, ALTERNATIVE HEALING		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU PONT, ANNE LLOYD <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RESTORATION ARTIST/MASON, ALTERNATIVE HEALING		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU PONT, ANNE LLOYD <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESTORATION ARTIST/MASON, ALTERNATIVE HEALING		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1076/4629 Rpt: 1079/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU PONT, ANNE LLOYD <hr/> 6 Contributor address; City; State; Zip Code KANSAS CITY, MO 64133	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RESTORATION ARTIST/MASON, ALTERNATIVE HEALING		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DU RON, CRIS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUAG, EILEEN <hr/> Contributor address; City; State; Zip Code REDWOOD CITY, CA 94061	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUARTE, ANGELINA <hr/> Contributor address; City; State; Zip Code RIO VISTA, CA 94571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUARTE, CARMO <hr/> Contributor address; City; State; Zip Code DEER PARK, NY 11729	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1077/4629 Rpt: 1080/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUARTE, JORGE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code MIAMI, FL 33143		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) JORGE A. DUARTE PA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBAZ, WANDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CANYON LAKE, TX 78133		
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) SYSCO
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBAZ, WANDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CANYON LAKE, TX 78133		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBAZ, WANDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CANYON LAKE, TX 78133		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBNICOFF, ERNEST	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CARDIFF, CA 92007		
Principal occupation / Job title (See Instructions) ENROLLED AGENT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1078/4629 Rpt: 1081/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBNICOFF, ERNEST <hr/> 6 Contributor address; City; State; Zip Code CARDIFF, CA 92007	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ENROLLED AGENT		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOC, SUSAN <hr/> Contributor address; City; State; Zip Code GREENWOOD VG, CO 80121	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOIS, CARO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOSE, CHARLENE <hr/> Contributor address; City; State; Zip Code CASA GRANDE, AZ 85122	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOSE, LINDA <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1079/4629 Rpt: 1082/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOSE, LINDA <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUCHARME, JACALYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUCKWORTH, BOB <hr/> Contributor address; City; State; Zip Code GARLAND TX, TX 75040	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUDDING, JANET <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) COG
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUDLEY, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1080/4629 Rpt: 1083/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUDLEY, SUSAN	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78737		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUDLEY, SUSAN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUDLEY, SUSAN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFF, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW HAVEN, CO 06511		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, ANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SETON HEALTHCARE FAMILY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1081/4629 Rpt: 1084/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, D JAN <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) MANAGEMENT PRACTICES GROUP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, JEANNIE <hr/> Contributor address; City; State; Zip Code GETTYSBURG, PA 17325-8410	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, ZACHARY <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95129	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) COMMUNITY WORKER		Employer (See Instructions) SANTA CLARA COUNTY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, ZACHARY <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95129	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) COMMUNITY WORKER		Employer (See Instructions) SANTA CLARA COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFLO, KATHRYN <hr/> Contributor address; City; State; Zip Code VERO BEACH, FL 32960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1082/4629 Rpt: 1085/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFOUR, TIMOTHY	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code BILLERICA, MA 01821		
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) GENUINE INTERACTIVE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFOUR, TIMOTHY	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code BILLERICA, MA 01821		
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) GENUINE INTERACTIVE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUGGAN, CHRISTOPHER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612		
Principal occupation / Job title (See Instructions) DISTRICT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUGGAN, CHRISTOPHER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612		
Principal occupation / Job title (See Instructions) DISTRICT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUGGAN, CHRISTOPHER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612		
Principal occupation / Job title (See Instructions) DISTRICT JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1083/4629 Rpt: 1086/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUHON, KOLBY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) COURT CLERK		9 Employer (See Instructions) TRAVIS COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, DEBORAH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY IF FORT WORTH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, DENNIS <hr/> Contributor address; City; State; Zip Code MART, TX 76664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, DENNIS <hr/> Contributor address; City; State; Zip Code MART, TX 76664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, DIANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1084/4629 Rpt: 1087/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, DIANNE	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code MESQUITE, TX 75149		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, DIANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MESQUITE, TX 75149		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, LORNA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code MART, TX 76664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, LORNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DE LEON, TX 76444		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, LORNA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DE LEON, TX 76444		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1085/4629 Rpt: 1088/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKE, NANCY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ELGIN, TX 78621		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, GLENN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, GLENN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746-7386		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, THOMAS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, THOMAS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1086/4629 Rpt: 1089/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, THOMAS <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, THOMAS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, THOMAS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, THOMAS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUMAN, JO ANN <hr/> Contributor address; City; State; Zip Code TEXARKANA, TX 75503	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1087/4629 Rpt: 1090/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUMAS, JOY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUMAS, PAULA <hr/> Contributor address; City; State; Zip Code GLADWYNE, PA 19035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUMKE, MATT <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUMKE, MATT <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNAGAN, MELISSA <hr/> Contributor address; City; State; Zip Code DUBLIN, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1088/4629 Rpt: 1091/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNAGAN, MELISSA <hr/> 6 Contributor address; City; State; Zip Code DUBLIN, TX 76446	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, JIM <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, JIM <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KAREN <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		Employer (See Instructions) GREATER HOUSTON COUNSELING SERVICES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KAREN <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1089/4629 Rpt: 1092/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KAREN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code MENLO PARK, CA 94025		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KATHLEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LAPORTE, TX 77571		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KATHLEEN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LAPORTE, TX 77571		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KATHLEEN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code LAPORTE, TX 77571		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KATHLEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LAPORTE, TX 77571		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1090/4629 Rpt: 1093/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code LAPORTE, TX 77571	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, KATHLEEN <hr/> Contributor address; City; State; Zip Code LAPORTE, TX 77571	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNFRUND, SHARON <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNFRUND, SHARON <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNGAN, BRIAN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75010	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED TUTOR		Employer (See Instructions) BRIAN DUNGAN, TUTOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1091/4629 Rpt: 1094/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNHAM, CHARLOTTE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LUBBOCK, TX 79416		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS TECH
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNHAM, CHARLOTTE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79416		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNHAM, DOUGLAS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DULUTH, MN 55811		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNKEL, HAROLD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NORFOLK, VA 23510		
Principal occupation / Job title (See Instructions) REAL ESTATE SALES		Employer (See Instructions) HAROLD DUNKEL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNKEL, HAROLD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NORFOLK, VA 23510		
Principal occupation / Job title (See Instructions) REAL ESTATE SALES		Employer (See Instructions) HAROLD DUNKEL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1092/4629 Rpt: 1095/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNKEL, HAROLD	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code NORFOLK, VA 23510		
8 Principal occupation / Job title (See Instructions) REAL ESTATE SALES		9 Employer (See Instructions) HAROLD DUNKEL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNKUM, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MARLIN, TX 76661		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNLAP, MARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ST LOUIS, MO 63121		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNLAP, SHELIA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ELAINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code OLYMPIA, WA 98502-5196		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1093/4629 Rpt: 1096/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ELAINE <hr/> 6 Contributor address; City; State; Zip Code OLYMPIA, WA 98502-5196	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, JEANNE <hr/> Contributor address; City; State; Zip Code MARINA DEL REY, CA 90292	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, LAURIE & CRAIG <hr/> Contributor address; City; State; Zip Code TAOS, NM 87571	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, MARC <hr/> Contributor address; City; State; Zip Code COOPER CITY, FL 33026	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, MARC <hr/> Contributor address; City; State; Zip Code COOPER CITY, FL 33026	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1094/4629 Rpt: 1097/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, MARY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BOERNE, TX 78006		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, MARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code KINSTON, NC 28501		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) DUNN & DALTON ARCHITECTS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) PRODUCT DEVELOPMENT CONSULTANT		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNNE, JIMMY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1095/4629 Rpt: 1098/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNNEWOLD, JANE <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) FUCKING ARTIST		9 Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNNING, KARLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH COUNTRY DAY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNNING, SAM <hr/> Contributor address; City; State; Zip Code STAFFORD, TX 77477	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSMORE, JULIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSMORE, JULIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1096/4629 Rpt: 1099/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, BRUCE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) METRICA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, JUDGE LINDA M. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77267	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, JUDGE LINDA M. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77267	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, JUDGE LINDA M. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77267	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, JUDGE LINDA M. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77267	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1097/4629 Rpt: 1100/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code BELTON, TX 76513	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MINISTER		9 Employer (See Instructions) FIRST CHRISTIAN CHURCH
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, MICHAEL <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) FIRST CHRISTIAN CHURCH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, STEPHEN <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) STEPHEN DUNSON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNSON, STEPHEN <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) STEPHEN DUNSON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUPONT, RICHARD <hr/> Contributor address; City; State; Zip Code GREENWICH, CT 06831	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VISUAL ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1098/4629 Rpt: 1101/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUPUIS, JOSEPHINE <hr/> 6 Contributor address; City; State; Zip Code ST PETERSBURG, FL 33701	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUPUY, LARAINÉ & CARR <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMMUNITY VOLUNTEER		Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUPUY, LARAINÉ & CARR <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMMUNITY VOLUNTEER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURALDE, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CCO		Employer (See Instructions) OGI
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURAND, MARY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1099/4629 Rpt: 1102/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURANTE, AL <hr/> 6 Contributor address; City; State; Zip Code LONGVIEW, TX 75601	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURBIN, DOREENA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURHAM, CHRISTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SENIOR POLICY ASSOCIATE		Employer (See Instructions) THE URBAN INSTITUTE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURHAM, RICHARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASHIER		Employer (See Instructions) HEB GROCERY
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURHAM, RICHARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASHIER		Employer (See Instructions) HEB GROCERY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1100/4629 Rpt: 1103/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURHAM, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code AZLE, TX 76020	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) DURHAM & GALINDO, PLLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURHAM, WILLIAM <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DURHAM & GALINDO, PLLC
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURON, DIANA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) PRIVATE PRACTICE
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURON, DIANA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) PRIVATE PRACTICE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURON, GEORGANNE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) PART-TIME PET SITTER AND ARTS/CRAFTS		Employer (See Instructions) PATRICIA G. DURON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1101/4629 Rpt: 1104/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURON, NICK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77003	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURON, PATRICIA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-7390	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PART-TIME SELF-EMPLOYED PET SITTER AND CRAFT		Employer (See Instructions) PATRICIA DURON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURON, PATRICIA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-7390	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PART-TIME SELF-EMPLOYED PET SITTER AND CRAFTS		Employer (See Instructions) PATRICIA G. DURON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DURANCE, AIMEE <hr/> Contributor address; City; State; Zip Code GAINESVILLE, FL 32608	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ORGANIZATIONAL DEVELOPMENT SPECIALIST		Employer (See Instructions) BSEE/DOI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUSON, BETTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1102/4629 Rpt: 1105/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUSON, BETTY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77030		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUSON, BETTY M	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77030		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUSON, BETTY M	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code HOUSTON, TX 77030		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTEIL, NORMA DIANE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTERROIL, DANA	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LOUISIANA FIFTH CIRCUIT COURT OF APPEAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1103/4629 Rpt: 1106/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTTENHAVER, KRISTA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731-4138	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROGRAM MANAGER		9 Employer (See Instructions) INDEED INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTTON, DALE <hr/> Contributor address; City; State; Zip Code CORTE MADERA, CA 94925	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTTON, PHIL <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) GARRAD HASSAN AMERICA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTY, CORY <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTY, DAVID <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1104/4629 Rpt: 1107/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTY, MARY <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTY, MARY <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTY, MARY <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUVLARIS, MARY <hr/> Contributor address; City; State; Zip Code WOODSTOCK, GA 30188	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DWYER, ALLISON <hr/> Contributor address; City; State; Zip Code AUATIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1105/4629 Rpt: 1108/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dwyer, Allison	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUATIN, TX 78703		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dwyer, Joanne	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11225		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dwyer, Joanne	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11225		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dye, Mary	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78530		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dye, Mary	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78530		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1106/4629 Rpt: 1109/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, JULIA <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76208-4501	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) FILMMAKER		9 Employer (See Instructions) JULIA DYER
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, JULIA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208-4501	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) ONE MIND PRODUCTIONS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, JULIA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208-4501	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FILMMAKER		Employer (See Instructions) JULIA DYER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, JULIA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208-4501	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) ONE MIND PRODUCTIONS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, SHARON <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20012	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) FEDERAL GOVERNMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1107/4629 Rpt: 1110/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYJAK, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77802-4766	7 Amount of Contribution (\$) \$51.97
8 Principal occupation / Job title (See Instructions) LICENSED CLINICAL SOCIAL WORKER		9 Employer (See Instructions) ST JOSEPH HEALTH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYKSTRA, DEWEY <hr/> Contributor address; City; State; Zip Code BOISE, ID 83712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED PHYSICS PROF		Employer (See Instructions) BOISE STATE UNIVERSITY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DZWONEK, BRIANNE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) HEALTHCARE INNOVATION		Employer (See Instructions) STVL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E CHAMBERLAIN, FRED <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E CHAMBERLAIN, FRED <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1108/4629 Rpt: 1111/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E CHAMBERLAIN, FRED <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E COCHRAN, KAREN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PETROLEUM LANDMAN		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E HARRIS, GEORGE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E LEWIS, MARY <hr/> Contributor address; City; State; Zip Code BLACKSHEAR, GA 31516	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1109/4629 Rpt: 1112/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> 6 Contributor address; City; State; Zip Code RUMSON, NJ 07760	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1110/4629 Rpt: 1113/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> 6 Contributor address; City; State; Zip Code RUMSON, NJ 07760	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SACCO JR, GREGORY <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SMITH, DAVID <hr/> Contributor address; City; State; Zip Code SNOHOMISH, WA 98290	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SMITH, DAVID <hr/> Contributor address; City; State; Zip Code SNOHOMISH, WA 98290	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1111/4629 Rpt: 1114/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E TARRADELL, MARIO	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HURST, TX 76054		
8 Principal occupation / Job title (See Instructions) BILINGUAL COMMUNICATIONS SPECIALIST		9 Employer (See Instructions) APEX CAPITAL CORP
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E TARRADELL, MARIO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HURST, TX 76054		
Principal occupation / Job title (See Instructions) BILINGUAL COMMUNICATIONS SPECIALIST		Employer (See Instructions) APEX CAPITAL CORP
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E WENDE, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75072		
Principal occupation / Job title (See Instructions) INSURANCE VERIFICATION		Employer (See Instructions) DR. DAVID FALKSTEIN & ASSOC.
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E WENDE, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75072		
Principal occupation / Job title (See Instructions) INSURANCE VERIFICATION		Employer (See Instructions) DR. DAVID FALKSTEIN & ASSOC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EADIE, STACEY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WEST CHESTER, PA 19380		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) MARIS GROVE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1112/4629 Rpt: 1115/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EADIE, STACEY <hr/> 6 Contributor address; City; State; Zip Code WEST CHESTER, PA 19380	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		9 Employer (See Instructions) MARIS GROVE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EADS, KATHY <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PASADENA INDEPENDENT SCHOOL DISTRICT
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EAGER, MARY BETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) SHELTON SCHOOL
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EAKMAN, ELIZABETH <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER, EDITOR, PROFESSOR THEREOF		Employer (See Instructions) SELF/SOUTHWESTERN U
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EAKMAN, ELIZABETH <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER, EDITOR, PROFESSOR THEREOF		Employer (See Instructions) SELF/SOUTHWESTERN U

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1113/4629 Rpt: 1116/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EARLE, ELISABETH	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78755		
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) TRAVIS COUNTY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASON, PATTY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASON, PATTY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASON, PATTY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASTMAN, RICHARD	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code BERKELEY, CA 94707		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1114/4629 Rpt: 1117/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASTWOOD, RACHEL <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110	7 Amount of Contribution (\$) \$28.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EATON, CAROLYN <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96822	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EATON, SARA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) ALLIES IN CHANGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EBERHARD, CARL <hr/> Contributor address; City; State; Zip Code DECATUR, GA 30033	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) WEB DEVELOPER		Employer (See Instructions) WIX
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECCLES, PETER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DIRECTOR OF POLICY AND PLANNING		Employer (See Instructions) LINK HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1115/4629 Rpt: 1118/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECHAVARRIA, LESLIE <hr/> 6 Contributor address; City; State; Zip Code ALAMOSA, CO 81101	7 Amount of Contribution (\$) \$10.70
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECHOLS, CATHARINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECHOLS, CATHARINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECKELMAN, COLIN <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92131	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) NORTHROP GRUMMAN
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECKERT, BARBARA & RICHARD <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76309	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1116/4629 Rpt: 1119/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ECKL, JACQUELINE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code ROCHESTER, NY 14610		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDDISON, JONATHAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-2149		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDDISON, JONATHAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-2149		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDDLEMAN, ELISA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77084		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDELMAN, DANIEL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90046		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1117/4629 Rpt: 1120/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDELMAN, DANIEL <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDEN, DEENA <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPERATIONS/PROJECT MANAGER		Employer (See Instructions) LUMINEX CORPORATION
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDEN, DEENA <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPERATIONS/PROJECT MANAGER		Employer (See Instructions) LUMINEX CORPORATION
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1118/4629 Rpt: 1121/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> 6 Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDENS, PAULA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1119/4629 Rpt: 1122/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDGREN, JOHN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAN RAMON, CA 94583		
8 Principal occupation / Job title (See Instructions) DRIVER		9 Employer (See Instructions) PRECISION AUTO REPAIR
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDLUND, CHRISTIANNE	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDLUND, CHRISTIANNE	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDMOND, LORRAINE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LOPEZ ISLAND WA, WA 98261		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDMOND, MATTHEW	Amount of Contribution (\$) \$2.08
Contributor address; City; State; Zip Code BOISE, ID 83702		
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) ADA COUNTY HIGHWAY DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1120/4629 Rpt: 1123/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDMOND, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code BOISE, ID 83702	7 Amount of Contribution (\$) \$2.08
8 Principal occupation / Job title (See Instructions) PLANNER		9 Employer (See Instructions) ADA COUNTY HIGHWAY DISTRICT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDMONDSON, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDMUNDSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDNER, VALENCIA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) CME CHURCH
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDUSEI-NYEMITEI, AUG <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ANESTHETIST		Employer (See Instructions) LAREDO DIGESTIVE HEALTH CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1121/4629 Rpt: 1124/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, BARBARA <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75082	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, BARBARA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CAMILLE <hr/> Contributor address; City; State; Zip Code HYATTSVILLE, DC 20782	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GOVERNMENT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CAMILLE <hr/> Contributor address; City; State; Zip Code HYATTSVILLE, DC 20782	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GOVERNMENT
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CAROL <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1122/4629 Rpt: 1125/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CAROL <hr/> 6 Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CAROL <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CAROL <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CHARISMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004-6210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNOLOGY STRATEGIST		Employer (See Instructions) MICROSOFT
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CHARISMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004-6210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNOLOGY STRATEGIST		Employer (See Instructions) MICROSOFT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1123/4629 Rpt: 1126/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code STONE MOUNTAIN, GA 30087	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DEANNA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DEBORAH <hr/> Contributor address; City; State; Zip Code KERRVILLE TEXAS, TX 78028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DEBORAH <hr/> Contributor address; City; State; Zip Code KERRVILLE TEXAS, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1124/4629 Rpt: 1127/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE TEXAS, TX 78028	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DEBORAH <hr/> Contributor address; City; State; Zip Code KERRVILLE TEXAS, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, DR.JOHNIE <hr/> Contributor address; City; State; Zip Code FITZGERALD, GA 31750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JOHN <hr/> Contributor address; City; State; Zip Code CENTER LINE, MI 48015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JOHN <hr/> Contributor address; City; State; Zip Code MEDINA, TX 78055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1125/4629 Rpt: 1128/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JON <hr/> 6 Contributor address; City; State; Zip Code S FREEPORT, ME 04078	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JON <hr/> Contributor address; City; State; Zip Code SOUTH FREEPORT, ME 04078	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JUDSON <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JUDSON <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1126/4629 Rpt: 1129/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, MARY <hr/> 6 Contributor address; City; State; Zip Code MARINA, CA 93933	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, MARY <hr/> Contributor address; City; State; Zip Code MARINA, CA 93933	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, PATRICIA <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, PATRICIA <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, SANDRA <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1127/4629 Rpt: 1130/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS-CORNWALL, MEREDITH <hr/> 6 Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EFFINGER, RAYMOND <hr/> Contributor address; City; State; Zip Code PALM SPRINGS, CA 92262	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) NA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EFFINGER, RAYMOND <hr/> Contributor address; City; State; Zip Code PALM SPRINGS, CA 92262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) NA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EFFORT, EDMUND <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15222	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EFTHYMIU, LISA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1128/4629 Rpt: 1131/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGAN, NATALIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGAN, NEIL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code OAKLAND, CA 94605		
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) CHRONICLE BOOKS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGBUEZE, MARGARET	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOSTON, MA 02131		
Principal occupation / Job title (See Instructions) NURSING		Employer (See Instructions) HSL
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGER, DENISE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) RABBI		Employer (See Instructions) CONGREGATION KOL AMI
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGG, LINDA	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code SALADO, TX 76571		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1129/4629 Rpt: 1132/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGG, RICHARD <hr/> 6 Contributor address; City; State; Zip Code SALADO, TX 76571-5403	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGG, RICHARD <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571-5403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGG, RICHARD <hr/> Contributor address; City; State; Zip Code SALADO, TX 76571-5403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGGEBRECHT, KATHY <hr/> Contributor address; City; State; Zip Code ORANGE, CA 92869	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EGGINS, JOHNATHANA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1130/4629 Rpt: 1133/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHLERT, KATHERINE	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code MOUNT PROSPECT, IL 60056		
8 Principal occupation / Job title (See Instructions) PASTOR		9 Employer (See Instructions) LUTHERAN CHURCH OF THE CROSS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHLERT LPC, KATHRYN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHN, WARREN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76012		
Principal occupation / Job title (See Instructions) LIBRARY CLERK		Employer (See Instructions) CITY OF ARLINGTON, TEXAS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBERG, BETSY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MEDFORD, MA 02155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBERG, BETSY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MEDFORD, MA 02155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1131/4629 Rpt: 1134/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBURG, BETSY <hr/> 6 Contributor address; City; State; Zip Code MEDFORD, MA 02155	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBURG, BETSY <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBURG, BETSY <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBURG, BETSY <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENBURG, RUTH <hr/> Contributor address; City; State; Zip Code TORRANCE, CA 90504	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1132/4629 Rpt: 1135/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRENKRANZ, ANDRA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRHARDT, HARRYETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRlich, HEYWARD <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10014	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRlich, KURT <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRlich, KURT <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1133/4629 Rpt: 1136/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRlich, KURT <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRlich, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) JIM HIGHTOWER & ASSOCIATES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EHRMANN, SUELLEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EICHELBERGER, GEORGE <hr/> Contributor address; City; State; Zip Code SMYRNA, GA 30080	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EICHORST, FRAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1134/4629 Rpt: 1137/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EICHORST, FRAN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EICHTEN, DEBORAH <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SQUARK VENTURES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EICKMEYER, JANET <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EILAND, CRAIG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EILAND & BONNIN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EILAND, CRAIG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EILAND & BONNIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1135/4629 Rpt: 1138/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EILENBERGER, BRENDA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BUDA, TX 78610		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EIMAN, NORMA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EIMAN, NORMA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EIMAN, NORMA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EINHORN, NANCY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1136/4629 Rpt: 1139/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EINHORN, NANCY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EINSTEIN, EDWIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EINSTEIN, EDWIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EINSTEIN, EDWIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EINSTEIN, EDWIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1137/4629 Rpt: 1140/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISEN, CARA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10024	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) READING SPECIALIST		9 Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISEN, CARA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) READING SPECIALIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISENBEIS, CHRISTINA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10014	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CATHOLIC CHARITIES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISENBERG, ANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROGRAM SPECIALIST		Employer (See Instructions) TEXAS HEALTH AND HUMAN SERVICES COMMISSION
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISENBERG, NELL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 11243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) WEILL CORNELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1138/4629 Rpt: 1141/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISENMAN, ERIC <hr/> 6 Contributor address; City; State; Zip Code LAFAYETTE, CA 94549	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) PACIFIC GAS AND ELECTRIC COMPANY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISENSTEIN, ERIC <hr/> Contributor address; City; State; Zip Code MEADOWBROOK, PA 19046	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEMPLE UNIVERSITY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISERLOH, LAURIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-4519	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EISSENBERG, THOMAS <hr/> Contributor address; City; State; Zip Code HENRICO, VA 23233	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) VCU
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, JACK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1139/4629 Rpt: 1142/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, JACK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, JACK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, JACK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, RICH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92117	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAM, RICH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1140/4629 Rpt: 1143/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELAMLLEWIS, ADDIE <hr/> 6 Contributor address; City; State; Zip Code RIVIERA BEACH, FL 33404	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDENBURG, MARYJO <hr/> Contributor address; City; State; Zip Code LACEY, WA 98503	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDER, ROXANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78755	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDRIDGE, CAROLE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNIVERSITY ADMINISTRATOR		Employer (See Instructions) CHAMBERLAIN UNIVERSITY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDRIDGE, CAROLE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNIVERSITY ADMINISTRATOR		Employer (See Instructions) CHAMBERLAIN UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1141/4629 Rpt: 1144/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDRIDGE, CAROLE <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) UNIVERSITY ADMINISTRATOR		9 Employer (See Instructions) CHAMBERLAIN UNIVERSITY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDRIDGE, CAROLE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNIVERSITY ADMINISTRATOR		Employer (See Instructions) CHAMBERLAIN UNIVERSITY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELDRIDGE, CAROLE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNIVERSITY ADMINISTRATOR		Employer (See Instructions) CHAMBERLAIN UNIVERSITY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELEJARZA, KASSANDRA <hr/> Contributor address; City; State; Zip Code ALAMO, TX 78516	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) MANAGING PARTNER		Employer (See Instructions) ARENA ANALYTICS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELENGA, SIGRID E <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98009-3406	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TECHNICAL EDITOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1142/4629 Rpt: 1145/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELENGA, SIGRID E	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code BELLEVUE, WA 98009-3406		
8 Principal occupation / Job title (See Instructions) TECHNICAL EDITOR		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELFANT, BRUCE	Amount of Contribution (\$) \$160.00
Contributor address; City; State; Zip Code AUSTIN, TX 78751		
Principal occupation / Job title (See Instructions) TAX ASSESSOR		Employer (See Instructions) TRAVIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIAS, BIRGIT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CORTLANDT MANOR, NY 10567		
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIAS, EDWARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIAS, EDWARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1143/4629 Rpt: 1146/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIAS, ELI <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELISSALDE, LINDA C <hr/> Contributor address; City; State; Zip Code CRYSTAL BEACH, TX 77650-1982	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELIZONDO, OMAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77282	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELKIN, IRENE <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELKIN, KAREN <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22306	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1144/4629 Rpt: 1147/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELKINS, SANDRA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PLANO, TX 75025		
8 Principal occupation / Job title (See Instructions) ART INSTRUCTOR		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELKINS, SANDRA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75025		
Principal occupation / Job title (See Instructions) ART INSTRUCTOR		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELKINS, SHANNON	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEDGE, RICHARD	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) STATE OF TEXAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEDGE, RICHARD	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1145/4629 Rpt: 1148/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEDGE, RICHARD <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) STATE OF TEXAS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEDGE, RICHARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) STATE OF TEXAS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEN, YVONNE <hr/> Contributor address; City; State; Zip Code SWARTZ CREEK, MI 48473	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEN, YVONNE <hr/> Contributor address; City; State; Zip Code SWARTZ CREEK, MI 48473	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEN, YVONNE <hr/> Contributor address; City; State; Zip Code SWARTZ CREEK, MI 48473	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1146/4629 Rpt: 1149/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLEN, YVONNE <hr/> 6 Contributor address; City; State; Zip Code SAFETY HARBOR, FL 34695	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLINGER, HUNTER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703-3935	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLINGTON, DAVID <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30316	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOT, MARYANN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DISABLED		Employer (See Instructions) SOCIAL SECURITY
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOT, MARYANN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DISABLED		Employer (See Instructions) SOCIAL SECURITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1147/4629 Rpt: 1150/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOT, MARYANN <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77380	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DISABLED		9 Employer (See Instructions) SOCIAL SECURITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, A J <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, DARCY <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, DARCY <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, DARCY <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1148/4629 Rpt: 1151/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code GIDDINGS, TX 78942	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) HOSPITAL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, DEBORAH <hr/> Contributor address; City; State; Zip Code PHOENIX, AZ 85034	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, MOLLY <hr/> Contributor address; City; State; Zip Code CRARYVILLE, NY 12521	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATRICIA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATRICIA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1149/4629 Rpt: 1152/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATTY <hr/> 6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) PLANET INDUSTRIES
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATTY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) PLANET INDUSTRIES
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATTY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) PLANET INDUSTRIES
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATTY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) PLANET INDUSTRIES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATTY <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) PLANET INDUSTRIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1150/4629 Rpt: 1153/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, PATTY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) PLANET INDUSTRIES
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, R BRUCE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75220		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, RONNI	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76012		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, RONNI	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76012		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, SICLINDA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ROANOKE, VA 24015		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1151/4629 Rpt: 1154/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, TIM <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DEVOPS ENGINEER		9 Employer (See Instructions) CAPITAL ONE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, TIM <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DEVOPS ENGINEER		Employer (See Instructions) CAPITAL ONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT-SMART, PATRICIA <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT-SMART, PATRICIA <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1152/4629 Rpt: 1155/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> 6 Contributor address; City; State; Zip Code STOCKTON, CA 95207	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1153/4629 Rpt: 1156/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code STOCKTON, CA 95207		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code STOCKTON, CA 95207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code STOCKTON, CA 95207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code STOCKTON, CA 95207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code STOCKTON, CA 95207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1154/4629 Rpt: 1157/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> 6 Contributor address; City; State; Zip Code STOCKTON, CA 95207	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BARBARA <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1155/4629 Rpt: 1158/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BLAKE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHIEF TALENT OFFICER		9 Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, BLAKE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHIEF TALENT OFFICER		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, DONNA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498-2659	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, DONNA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498-2659	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, DONNA J <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1156/4629 Rpt: 1159/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, DONNA J <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, DONNA J <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, GREG <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, GREG <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, MAGGIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1157/4629 Rpt: 1160/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, MAGGIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TRAVIS COUNTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, MAGGIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, NANCY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, NICOLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES DIRECTOR		Employer (See Instructions) RIVER OAKS COUNTRY CLUB
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, TED <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1158/4629 Rpt: 1161/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLISON, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code SAN RAFAEL, CA 94901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLISON, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code WESTFIELD, NJ 07090	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RUTGERS UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLISON, ROCHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLISON, ROCHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLMAN, IRA <hr/> Contributor address; City; State; Zip Code HERMOSA BEACH, CA 90254	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1159/4629 Rpt: 1162/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLMER, MINDY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELMAZI, BLERIM <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELMAZI, BLERIM <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELMORE, MELIDA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXEC CATERING DIRECTOR		Employer (See Instructions) CHICK-FIL-A
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELMORE-BARBEE, CHIQUITA <hr/> Contributor address; City; State; Zip Code KALAMAZOO, MI 49006	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1160/4629 Rpt: 1163/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELPHINGSTONE, SCOTT	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75205		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELROD, DIANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) TWU
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELROD, DIANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) TWU
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELSEN, KAREN	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELSTONE, NORMAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79416		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1161/4629 Rpt: 1164/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELTERMAN, MOISES <hr/> 6 Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960-2233	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELVEN, JOYCE <hr/> Contributor address; City; State; Zip Code TROPHY CLUB, TX 76262	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMEH, SAMUEL <hr/> Contributor address; City; State; Zip Code SNELLVILLE, GA 30039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) LIVELY STONES MIN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMERSON, ELISSA <hr/> Contributor address; City; State; Zip Code DELAND, FL 32724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMERSON, ELISSA <hr/> Contributor address; City; State; Zip Code DELAND, FL 32724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1162/4629 Rpt: 1165/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMR, TOM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDELMAN, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDELMAN, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDERLE, NORMAN <hr/> Contributor address; City; State; Zip Code VERONA, WI 53593	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDO, KATY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) KEURIG DR PEPPER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1163/4629 Rpt: 1166/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDRES, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICE OFFICER		9 Employer (See Instructions) CITY OF AUSTIN
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGDAHL, JON <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) BANC CARD OF TEXAS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGBRETSON, CATHY <hr/> Contributor address; City; State; Zip Code COBURG, OR 97408	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) MARKET OF CHOICE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGBRETSON, CATHY <hr/> Contributor address; City; State; Zip Code COBURG, OR 97408	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) MARKET OF CHOICE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGEL, ILENE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30305	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1164/4629 Rpt: 1167/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELHARDT, HELEN <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11210	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELHARDT, HELEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELHARDT, HELEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) NONE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELHARDT, HELEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELHARDT, HELEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11210	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1165/4629 Rpt: 1168/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code MESA, AZ 85206		
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) BBMSS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMP;OYED		Employer (See Instructions) BBMSS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$20.22
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) BBMSS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SERVICE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMP;OYED		Employer (See Instructions) BBMSS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1166/4629 Rpt: 1169/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	7 Amount of Contribution (\$) \$20.22
6 Contributor address; City; State; Zip Code EL PASO, TX 79903		
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) BBMSS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) BEARSBMSS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SERVICE
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) BBMSS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELS, JAN	Amount of Contribution (\$) \$20.22
Contributor address; City; State; Zip Code EL PASO, TX 79903		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) BBMSS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1167/4629 Rpt: 1170/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELTER, BARBARA <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGELTER, BARBARA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLERT, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLERT, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLISH, IDA <hr/> Contributor address; City; State; Zip Code COLUMBIA, SC 29203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLISH, JOHN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77040	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) CIIVL & SURVEYING		9 Employer (See Instructions) REKHA ENGINEERING, INC
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLISH, MARYBETH <hr/> Contributor address; City; State; Zip Code HAINES CITY, FL 33844	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PCSB
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENGLISH, MARYBETH <hr/> Contributor address; City; State; Zip Code HAINES CITY, FL 33844	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PCSB
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENLOE, PAUL <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PAUL ENLOE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENNIS, ARIELLE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30309	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) CAMPAIGN MANAGER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1169/4629 Rpt: 1172/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENNIS, ARIELLE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code ATLANTA, GA 30309		
8 Principal occupation / Job title (See Instructions) CAMPAIGN MANAGER		9 Employer (See Instructions) SELF-EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENNIS, CAROLYN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENRIQUEZ, JESSICA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758-8681		
Principal occupation / Job title (See Instructions) BENEFITS COORDINATOR		Employer (See Instructions) VETERANS AFFAIRS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENRIQUEZ, OTILIA BUANTELO	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BURLESON, TX 76028		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENRIQUEZ, SHANNON	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code DALLAS, TX 75228-3334		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY OF DALLAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1170/4629 Rpt: 1173/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENRIQUEZ, SHANNON <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75228-3334	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) CITY OF DALLAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENTERPRISE LLC, ROSABELLA <hr/> Contributor address; City; State; Zip Code BELMONT, CA 94002	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) HAIRSTYLIST		Employer (See Instructions) SELF EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPPLE, MELISSA <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPPLE, MELISSA <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPPLE, MELISSA <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1171/4629 Rpt: 1174/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPPLE, MELISSA <hr/> 6 Contributor address; City; State; Zip Code SANTA FE, NM 87505	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) HEALTHCARE		9 Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, JANICE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, JANICE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, PAT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, PAT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1172/4629 Rpt: 1175/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, PAT <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, PAT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPSTEIN, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) INVESTMENT MANAGER		Employer (See Instructions) PROPHET CAPITAL
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERB, ARTHUR <hr/> Contributor address; City; State; Zip Code NEW CANEY, TX 77357	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) VENT AIRLINES
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERB, ARTHUR <hr/> Contributor address; City; State; Zip Code NEW CANEY, TX 77357	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) VENT AIRLINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1173/4629 Rpt: 1176/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERB, STEPHEN	7 Amount of Contribution (\$) \$7.29
6 Contributor address; City; State; Zip Code SEATTLE, WA 98109-3802		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERETH, STEVE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code VALLEY SPRINGS, CA 95252		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERHART, CYNTHIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75071		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MISD
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERHART, CYNTHIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75071		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERICKSON, AMALIA	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code LONG BEACH, CA 90278		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1174/4629 Rpt: 1177/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERICKSON, BILL <hr/> 6 Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92646	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERICKSON, QUINCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEF		Employer (See Instructions) FETE ACCOMPLI
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERICKSON, QUINCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEF		Employer (See Instructions) FETE ACCOMPLI
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERICKSON, REGINA <hr/> Contributor address; City; State; Zip Code PINEHURST, TX 77362	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CLERICAL		Employer (See Instructions) ARCHER SERVICES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERIK, ERICK <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DISASTER ASSISTANCE		Employer (See Instructions) DEPT OF HOMELAND SECURITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1175/4629 Rpt: 1178/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERIK, ERICK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78403		
8 Principal occupation / Job title (See Instructions) DISASTER ASSISTANCE		9 Employer (See Instructions) DEPT OF HOMELAND SECURITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERIKSEN, ERIN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERIKSEN, ERIN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERION, IRENE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRYAN, TX 77802		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERION, IRENE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRYAN, TX 77802		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1176/4629 Rpt: 1179/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERMAN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code BRIDGEPORT, CT 06604	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERMAN, ROBERT <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, CT 06604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERMAN, ROBERT <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, CT 06604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERMAN, ROBERT <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, CT 06604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERNST, PATRICK R <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1177/4629 Rpt: 1180/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERNSTER, NICHOLAS <hr/> 6 Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80904	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERNSTER, NICHOLAS <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80904	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, LAURA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90034	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UCLA
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, LAURA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90034	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UCLA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, PATRICIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1178/4629 Rpt: 1181/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, PATRICIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, PATRICIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERSKINE, PATRICIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERTEL, STEPHANIE <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1179/4629 Rpt: 1182/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ERTEL, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code MOUNTAIN HOME, TX 78058	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCALANTE, IRENE <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SENIOR ACCOUNT DIRECTOR		Employer (See Instructions) SABRE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCALANTE, IRENE <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR ACCOUNT DIRECTOR		Employer (See Instructions) SABRE
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCALANTE, IRENE <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR ACCOUNT DIRECTOR		Employer (See Instructions) SABRE
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCARENO, LOUIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78207	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1180/4629 Rpt: 1183/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCOBAR, ICELA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		9 Employer (See Instructions) DEL VALLE ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCOBAR, JAVIER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCOBAR, SONIA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCOBAR, VERONICA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79923	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CONGRESSWOMAN		Employer (See Instructions) VERONICA ESCOBAR FOR CONGRESS
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESCOBAR, VERONICA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79923	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CONGRESSWOMAN		Employer (See Instructions) VERONICA ESCOBAR FOR CONGRESS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1181/4629 Rpt: 1184/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPENSEN, LAURA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPINOSA, ANDREA <hr/> Contributor address; City; State; Zip Code SPRINGVILLE, CA 93265	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPINOSA, ANDREA <hr/> Contributor address; City; State; Zip Code SPRINGVILLE, CA 93265	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPINOSA, BILSEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77017	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LE		Employer (See Instructions) HARRIS COUNTY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPINOSA, LYDIA <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1182/4629 Rpt: 1185/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPINOSA, LYDIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HARLINGEN, TX 78550		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPINOZA, DAVID	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77093		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) PBK
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESPO, CARYN	Amount of Contribution (\$) \$50.25
Contributor address; City; State; Zip Code LOS ANGELES, CA 90049		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1183/4629 Rpt: 1186/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1184/4629 Rpt: 1187/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1185/4629 Rpt: 1188/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTABROOK, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTEP, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) RATER		Employer (See Instructions) ETS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1186/4629 Rpt: 1189/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTES, ART <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) FLEXTRONICS
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTES, ART <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FLEXTRONICS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTES, JANICE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF-EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTEVEZ, DONNA <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34208	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTEVEZ, DONNA <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34208	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1187/4629 Rpt: 1190/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTEVEZ, DONNA <hr/> 6 Contributor address; City; State; Zip Code BRADENTON, FL 34208	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTRADA, JORGE <hr/> Contributor address; City; State; Zip Code SOCORRO, TX 79927	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BAILIFF		Employer (See Instructions) EL PASO COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTUDILLO, CHARLES <hr/> Contributor address; City; State; Zip Code SONOMA, CA 95476	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETESSE, GERALD <hr/> Contributor address; City; State; Zip Code CEDAR, MN 55011	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETIENNE, GLENN R. <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SOUTHCOAST ENERGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1188/4629 Rpt: 1191/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETKES, DONALD <hr/> 6 Contributor address; City; State; Zip Code CLAREMONT, CA 91711-4501	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETKES, DONALD <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETKES, DONALD <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETKES, DONALD <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711-4501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ETKES, DONALD <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711-4501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1189/4629 Rpt: 1192/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EUSANIO, RICHARD 6 Contributor address; City; State; Zip Code AUSTIN, TX 78724	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		9 Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EUSTACHE, MARIE Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, BARRY Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) HUITT-ZOLLARS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, BARRY Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) HUITT-ZOLLARS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, BRIAN Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1190/4629 Rpt: 1193/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, CAROL ELAINE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code GLEN ROSE, TX 76043		
8 Principal occupation / Job title (See Instructions) NURSE EDUCATOR		9 Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, CAROL ELAINE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GLEN ROSE, TX 76043		
Principal occupation / Job title (See Instructions) NURSE EDUCATOR		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, CAROL ELAINE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GLEN ROSE, TX 76043		
Principal occupation / Job title (See Instructions) NURSE EDUCATOR		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, DARREL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75069		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) DEP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, DARREL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75069		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) DEP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1191/4629 Rpt: 1194/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KAREN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HUNT, TX 78024		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KAREN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HUNT, TX 78024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KATHLEEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) CITY OF SAN ANTONIO
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KATHLEEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) CITY OF SAN ANTONIO
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KIM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) KARIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1192/4629 Rpt: 1195/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KIM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) KARIS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, KIM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) KARIS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, OCTAVIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11221		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, RICHARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) LANDSCAPER		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, RICHARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) LANDSCAPER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1193/4629 Rpt: 1196/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, STEFFANIE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75205	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS, STEFFANIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVANS-SHABAZZ, DR. CAROLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) CITY OF HOUSTON
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVARD, MICHELE <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT		Employer (See Instructions) MICHELE EVARD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1194/4629 Rpt: 1197/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		9 Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1195/4629 Rpt: 1198/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVBAGHARU, ODUS <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) COMMUNICATIONS DIRECTOR		9 Employer (See Instructions) HARRIS COUNTY DEMOCRATIC PARTY
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETT, DEANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETT, DEANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETT, PAULA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETT, PAULA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1196/4629 Rpt: 1199/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETT, PAULA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETT, PAULA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETTE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code GERMANTOWN, MD 20874	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERETTE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code GERMANTOWN, MD 20874	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERITT, SHAY <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87506	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) KINDERCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1197/4629 Rpt: 1200/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERITT, TAYLOR	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77065		
8 Principal occupation / Job title (See Instructions) BUSINESS ONLINE BANKING		9 Employer (See Instructions) STELLAR BANK
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EVERSOLE, ANDREW	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GALVESTON, TX 77551-1737		
Principal occupation / Job title (See Instructions) INFRASTRUCTURE SPECIALIST		Employer (See Instructions) KYNDRYL, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWALD, BART	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HILLTOP LAKES, TX 77871		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWALD, BART	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HILLTOP LAKES, TX 77871		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWALD, BART	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HILLTOP LAKES, TX 77871		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1198/4629 Rpt: 1201/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWALD, BART <hr/> 6 Contributor address; City; State; Zip Code HILLTOP LAKES, TX 77871	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWIG, MARK <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWIG, MARK <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWING, KIMBERLY <hr/> Contributor address; City; State; Zip Code SPRING ARBOR, MI 49283	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EWING, NICHOLAS <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95616	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) STATE OF CALIFORNIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1199/4629 Rpt: 1202/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EYRE, DANA <hr/> 6 Contributor address; City; State; Zip Code OCEANSIDE, CA 92056	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) EYRE & ASSOCIATES		9 Employer (See Instructions) SOCIOLOGIST
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F BUCHANAN, GOLNAR <hr/> Contributor address; City; State; Zip Code WATERLOO, IA 50701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F BUCHANAN, GOLNAR <hr/> Contributor address; City; State; Zip Code WATERLOO, IA 50701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F HAAS JR, THOMAS <hr/> Contributor address; City; State; Zip Code ROSELLE PARK, NJ 07204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LOCOMOTIVE ENGINEER		Employer (See Instructions) NJ TRANSIT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FABIS, NAOMI <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1200/4629 Rpt: 1203/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FABIS, NAOMI <hr/> 6 Contributor address; City; State; Zip Code LAS VEGAS, NV 89103	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FABRY, DEBORAH <hr/> Contributor address; City; State; Zip Code WHITE SULPHUR SPRINGS, WV 24986	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FABRY, DEBORAH <hr/> Contributor address; City; State; Zip Code WHITE SULPHUR SPRINGS, WV 24986	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FACKERT, JAMES <hr/> Contributor address; City; State; Zip Code BRIGHTON, MI 48116	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CAE INC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGAN, ANNIE <hr/> Contributor address; City; State; Zip Code LA MIRADA, CA 90638-4443	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SILVERSMITH		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1201/4629 Rpt: 1204/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGERSTROM, DONNA <hr/> 6 Contributor address; City; State; Zip Code PELHAM, NY 10803	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) HOGAN LOVELLS US LLP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGERSTROM, DONNA <hr/> Contributor address; City; State; Zip Code PELHAM, NY 10803	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HOGAN LOVELLS US LLP
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGLEY, MARTHA <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGLEY, MARTHA <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGLEY, MARTHA <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1202/4629 Rpt: 1205/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGLEY, MARTHA <hr/> 6 Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAGLEY, MARTHA <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76087	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHL, TAREK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TOSM
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHNERT, CELESTE <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TAYLOR MORRISON
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHR, RICK <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98121	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RICK FAHR		Employer (See Instructions) RICK FAHR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1203/4629 Rpt: 1206/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRENKOPF, PETER <hr/> 6 Contributor address; City; State; Zip Code POLSON, MT 59860	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRENKOPF, PETER <hr/> Contributor address; City; State; Zip Code POLSON, MT 59860	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRENKOPF, PETER <hr/> Contributor address; City; State; Zip Code POLSON, MT 59860	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRNER, MARILYN <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95062	Amount of Contribution (\$) \$15.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRNER, MARILYN <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95062	Amount of Contribution (\$) \$15.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1204/4629 Rpt: 1207/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHS, CAROL <hr/> 6 Contributor address; City; State; Zip Code THE HILLS, TX 78738	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, FRANK <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, FRANK <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, FRANK <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, STELLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR PROFESSIONAL		Employer (See Instructions) UNT SYSTEM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1205/4629 Rpt: 1208/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIR, STELLA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76133		
8 Principal occupation / Job title (See Instructions) HR PROFESSIONAL		9 Employer (See Instructions) UNT SYSTEM
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRBANKS, CHARLES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HIDEAWAY, TX 75711		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRBANKS, CHARLES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HIDEAWAY, TX 75711		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRBANKS, KAY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HIDEAWAY, TX 75771		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRBANKS, KAY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HIDEAWAY, TX 75771		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1206/4629 Rpt: 1209/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAIRWEATHER, KIM <hr/> 6 Contributor address; City; State; Zip Code LA VERNE, CA 91750	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAISON, GRETA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASEWORKER		Employer (See Instructions) DC GOVERNMENT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAISON, GRETA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASEWORKER		Employer (See Instructions) DC GOVERNMENT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAISON, GRETA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASEWORKER		Employer (See Instructions) DC GOVT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAISON, GRETA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20017-2210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASEWORKER		Employer (See Instructions) DC GOVERNMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1207/4629 Rpt: 1210/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALCONA, JAN <hr/> 6 Contributor address; City; State; Zip Code PITTSBURGH, PA 15237	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TECHNICAL WRITER		9 Employer (See Instructions) MSA
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALCONA, JAN <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15237	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) MSA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALCONE, BETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALCONER, ASHA <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94590	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FIBER		Employer (See Instructions) ZAYO
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALES, WILLIAM <hr/> Contributor address; City; State; Zip Code AMES IOWA, IA 50014	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1208/4629 Rpt: 1211/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALES, WILLIAM H <hr/> 6 Contributor address; City; State; Zip Code AMES, IA 50014	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALES, WILLIAM H <hr/> Contributor address; City; State; Zip Code AMES, IA 50014	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALES, WILLIAM H <hr/> Contributor address; City; State; Zip Code AMES, IA 50014	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALES, WILLIAM H <hr/> Contributor address; City; State; Zip Code AMES, IA 50014	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALKSTEIN, FRANK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1209/4629 Rpt: 1212/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALLI, LAURA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78750		
8 Principal occupation / Job title (See Instructions) SCHOOL LIBRARIAN		9 Employer (See Instructions) ROUND ROCK ISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALLON, JENNIFER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALTEISEK, LESLIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALVEY, PATRICK	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code GREENFIELD, MA 01302		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FALVEY, PATRICK	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code GREENFIELD, MA 01302		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1210/4629 Rpt: 1213/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FANDOS, CECILE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78753	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) OUTREACH COORDINATOR		9 Employer (See Instructions) CAPITAL IDEA
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FANG, ZHIQIANG <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RED HAT INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARABEE, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARABEE, KAREN <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARENGA, CYNTHIA <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CYNTHIA FARENGA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1211/4629 Rpt: 1214/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARIAS, AGNES <hr/> 6 Contributor address; City; State; Zip Code ODENTON, MD 21113	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARINAS, LEN <hr/> Contributor address; City; State; Zip Code LEWISTON, ME 04240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) CENTRAL MAINE HEALTH CARE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARIS, CELESTE <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARIS, GAIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARIS, GAIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1212/4629 Rpt: 1215/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLEY, CARL <hr/> 6 Contributor address; City; State; Zip Code WEBSTER, TX 77598	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLEY, CARL <hr/> Contributor address; City; State; Zip Code WEBSTER, TX 77598	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLEY, CARL <hr/> Contributor address; City; State; Zip Code WEBSTER, TX 77598	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLEY, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-5345	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) COMAL ISD/BILL BROWN ELEMENTARY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1213/4629 Rpt: 1216/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-5345	7 Amount of Contribution (\$) \$130.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) COMAL ISD/BILL BROWN ELEMENTARY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-5345	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) COMAL ISD/BILL BROWN ELEMENTARY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) COMAL ISD/BILL BROWN ELEMENTARY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1214/4629 Rpt: 1217/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARLOW, KIM <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-5345	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) COMAL ISD/BILL BROWN ELEMENTARY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARMER, GARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) TITLE INSURANCE		Employer (See Instructions) HERITAGE TITLE COMPANY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARMER, PATRICK <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIVERSITY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARNELL, POUPETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077-5831	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARR, ELIZABETH <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63108	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROJECT MANAGER		Employer (See Instructions) BI-STATE DEVELOPMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1215/4629 Rpt: 1218/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, DIANA <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR & AUTHOR		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, JANET <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, JANET <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, KIMBERLY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, KIMBERLY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1216/4629 Rpt: 1219/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, KIMBERLY <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, KIMBERLY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080-2345	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, KIMBERLY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080-2345	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, MARTHA <hr/> Contributor address; City; State; Zip Code BREVARD, NC 28712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, MARTHA <hr/> Contributor address; City; State; Zip Code BREVARD, NC 28712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1217/4629 Rpt: 1220/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRAR, MARTHA <hr/> 6 Contributor address; City; State; Zip Code BREVARD, NC 28712	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRELL, BRIAN <hr/> Contributor address; City; State; Zip Code NORTH DIGHTON, MA 02764	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PLUMBER		Employer (See Instructions) LOCAL 12
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code LAFAYETTE HILL, PA 19444	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code LAFAYETTE HILL, PA 19444	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code LAFAYETTE HILL, PA 19444	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1218/4629 Rpt: 1221/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRELL, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code LAFAYETTE HILL, PA 19444	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRINGTON, MONICA <hr/> Contributor address; City; State; Zip Code SOUTH BURLINGTON, VT 05403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARRIS, BETTE <hr/> Contributor address; City; State; Zip Code DUNLAP, IL 61525	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FASKEN, ANDY <hr/> Contributor address; City; State; Zip Code PARIS, TX 75462	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FASKEN, ANDY <hr/> Contributor address; City; State; Zip Code PARIS, TX 75462	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1219/4629 Rpt: 1222/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FATEHI, PARISA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SOCIAL IMPACT		9 Employer (See Instructions) INDEED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FATTIG, DIANE <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95819	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DEPOSITION REPORTER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUCHEUX, SHARON <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUDE, JENNA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR ASSOCIATE		Employer (See Instructions) CAPITAL ONE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUDE, JENNA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR ASSOCIATE		Employer (See Instructions) CAPITAL ONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1220/4629 Rpt: 1223/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUDE, JENNA <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) HR ASSOCIATE		9 Employer (See Instructions) CAPITAL ONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULHABER, LINDA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULHABER, LINDA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULHABER, LINDA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULK, JOYCE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1221/4629 Rpt: 1224/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULK, PAUL <hr/> 6 Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73102	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULKNER, DIANE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAULKNER, KEITH <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUST, JUDITH <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUST, JUDITH <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1222/4629 Rpt: 1225/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUST, JUDITH	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUST, JUDITH	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUST, TRAVIS	Amount of Contribution (\$) \$1.88
Contributor address; City; State; Zip Code WELLESLEY, MA 02481		
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) UMASS CHAN MEDICAL SCHOOL
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUST, TRAVIS	Amount of Contribution (\$) \$1.88
Contributor address; City; State; Zip Code WELLESLEY, MA 02481		
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) UMASS CHAN MEDICAL SCHOOL
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAUSTINELLA, FABRIZIA	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) IM PHYSICIAN		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1223/4629 Rpt: 1226/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAVELA, RAQUEL <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) GROW AMERICA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAZ SANDIFER, MARIA <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$107.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) CHRISTUS HEALTH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEARON, NICOLE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT MGR		Employer (See Instructions) IVX
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEATHERSTONE, BRENDA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEATHERSTONE, BRENDA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1224/4629 Rpt: 1227/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEDER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code IRVINGTON, NY 10533	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROGRAM OFFICER		9 Employer (See Instructions) MELLON FOUNDATION
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEDER, SUSAN <hr/> Contributor address; City; State; Zip Code IRVINGTON, NY 10533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM OFFICER		Employer (See Instructions) MELLON FOUNDATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEDERICI, TAMARA <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27607	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) PACE UNIVERSITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEE, BERNADETTE <hr/> Contributor address; City; State; Zip Code BAYSIDE, NY 11361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEE, BERNADETTE <hr/> Contributor address; City; State; Zip Code BAYSIDE, NY 11361	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1225/4629 Rpt: 1228/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEE, BERNADETTE <hr/> 6 Contributor address; City; State; Zip Code BAYSIDE, NY 11361	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEENEY, JUSTIN <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEENEY, JUSTIN <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEHLBAUM, ELIZABETH <hr/> Contributor address; City; State; Zip Code MABANK, TX 75147	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ATHENS ISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIFER, THEODORE <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20852	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1226/4629 Rpt: 1229/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIFER, THEODORE <hr/> 6 Contributor address; City; State; Zip Code ROCKVILLE, MD 20852	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77265	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EXP REALTY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77265	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EXP REALTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77265	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EXP REALTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77265	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EXP REALTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1227/4629 Rpt: 1230/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77265		
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) EXP REALTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77265		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EXP REALTY
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77265		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EXP REALTY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIGELSON, GENE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77265		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEINSTEIN, SHERI	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code VANCOUVER, WA 98686		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1228/4629 Rpt: 1231/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEISSNER, NANCY <hr/> 6 Contributor address; City; State; Zip Code BELTSVILLE, MD 20705	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIST, PABLO <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEKETE, CONSTANCE <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89102	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEKETE, SOMITA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEKETE, SOMITA <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1229/4629 Rpt: 1232/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEKETE, SOMITA <hr/> 6 Contributor address; City; State; Zip Code MIDLAND, TX 79701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELKINS, GLORIA <hr/> Contributor address; City; State; Zip Code NEWCASTLE, CA 95658	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELL, JEFFREY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BY INVITATION-ONLY PRIVATE INVESTIGATOR		Employer (See Instructions) ME
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELLOWS, AURRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009-1025	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) VINSON & ELKINS LLP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FELTON, NICOLE <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20882	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1230/4629 Rpt: 1233/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FENG, YUANYUAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) TXDSHS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FENG, YUANYUAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) DSHS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FENN, JAMES <hr/> Contributor address; City; State; Zip Code WEST VALLEY CITY, UT 84128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) QUALITY MANAGER		Employer (See Instructions) THOMPSON MANUFACTURING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FENN, WENDY H <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FENNELL, IRIS <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) HOUSTONHOGLE LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1231/4629 Rpt: 1234/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FENNER, JOHN <hr/> 6 Contributor address; City; State; Zip Code LAS VEGAS, NV 89123	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERA, BILL <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) EY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERA, BILL <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) EY
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEREBEE, LEQUINNE (LQ) <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEREBEE, LEQUINNE (LQ) <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1232/4629 Rpt: 1235/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUS, GEORGE <hr/> 6 Contributor address; City; State; Zip Code SCHAUMBURG, IL 60173	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUS, GEORGE <hr/> Contributor address; City; State; Zip Code SCHAUMBURG, IL 60173	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUS, JIM <hr/> Contributor address; City; State; Zip Code TUMACACORI, AZ 85640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUS, JIM <hr/> Contributor address; City; State; Zip Code TUMACACORI, AZ 85640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, BETSY <hr/> Contributor address; City; State; Zip Code EXETER, NH 03833	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1233/4629 Rpt: 1236/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, BETSY <hr/> 6 Contributor address; City; State; Zip Code EXETER, NH 03833	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, JO ANN <hr/> Contributor address; City; State; Zip Code DAVISON, MI 48423	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, JOANN <hr/> Contributor address; City; State; Zip Code DAVISON, MI 48423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, LORI <hr/> Contributor address; City; State; Zip Code PLANTATION, FL 33322	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DIRECTING MANAGER		Employer (See Instructions) GROSS MORTGAGE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, MICHAEL <hr/> Contributor address; City; State; Zip Code PORT LAVACA, TX 77979	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1234/4629 Rpt: 1237/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON QUEEN, JULIE <hr/> 6 Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) FEDERAL GOVERNMENT
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON QUEEN, JULIE <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FEDERAL GOVERNMENT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, ANITA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, ANITA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, ANITA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1235/4629 Rpt: 1238/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, GERARDO <hr/> 6 Contributor address; City; State; Zip Code HUNTINGTON PARK, CA 90255	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) PACIFIC LIGHTING
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, KATHERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) KATHERINE FERNANDEZ
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, KATHERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) KATHERINE FERNANDEZ
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, MARTHA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SR. DIRECTOR		Employer (See Instructions) DALLAS COLLEGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, MARY ANN <hr/> Contributor address; City; State; Zip Code SAN JACINTO, CA 92583	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1236/4629 Rpt: 1239/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, MARY ANN	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code SAN JACINTO, CA 92583		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDEZ, MIGUEL	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code EL PASO, TX 79902		
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) TRANSTELCO
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNANDO, DINALI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) STATE OF TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERNBACH, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRARO, MARIANNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PARK CITY, UT 84098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1237/4629 Rpt: 1240/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRARO, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code PARK CITY, UT 84098	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, DONNA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, DONNA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, TONI <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRELL, TONI <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1238/4629 Rpt: 1241/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERREN, KIMBERLEY <hr/> 6 Contributor address; City; State; Zip Code SAN FERNANDO, CA 91340	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERREN, KIMBERLEY <hr/> Contributor address; City; State; Zip Code SAN FERNANDO, CA 91340	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TELEFUNDRAISER		Employer (See Instructions) DONOR SERVICES HRUOP LLC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERREN, KIMBERLEY <hr/> Contributor address; City; State; Zip Code SAN FERNANDO, CA 91340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERREN, KIMBERLEY <hr/> Contributor address; City; State; Zip Code SAN FERNANDO, CA 91340	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TELEFUNDRAISER		Employer (See Instructions) DONOR SERVICES HRUOP LLC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERREN, KIMBERLEY <hr/> Contributor address; City; State; Zip Code SAN FERNANDO, CA 91340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1239/4629 Rpt: 1242/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRER, CANDIDA <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	7 Amount of Contribution (\$) \$12.01
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRERO, GAIL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRERO, GAIL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRERO, GAIL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRICK, FRIEDA <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1240/4629 Rpt: 1243/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIER, MARIE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIS, JAMES <hr/> Contributor address; City; State; Zip Code PALM DESERT, CA 92211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIS, LAVELLE <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GATESVILLE ISD
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIS, LAVELLE <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GATESVILLE ISD
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIS, S <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) EDUCATIONAL PUBLISHING		Employer (See Instructions) HMH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1241/4629 Rpt: 1244/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIS, S <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL PUBLISHING		9 Employer (See Instructions) HMH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRIS, SUSAN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERRO, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERSCHKE, MARGUERITE <hr/> Contributor address; City; State; Zip Code DOUGLAS, MA 01516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FETONTE, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) STATE WORKER		Employer (See Instructions) TWC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1242/4629 Rpt: 1245/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FETTER, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) JENNIFER FETTER-MATTHYS
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) THIS DONATION IS FROM OUR REVOLUTION BRAZORIA		Employer (See Instructions) ORBC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1243/4629 Rpt: 1246/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) THIS DONATION IS FROM OUR REVOLUTION BRAZORIA		Employer (See Instructions) ORBC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) BRAZORIA DRAINAGE DISTRICT 4
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FICKLING, SARAH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FICKLING, SARAH <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1244/4629 Rpt: 1247/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FICKLING, SARAH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIEGENBAUM, DARRELL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HIGGINSVILLE, MO 64037		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELD, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEWTOWN, CT 06470		
Principal occupation / Job title (See Instructions) ENGINEERING MANAGER		Employer (See Instructions) GOOGLE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELD, MEGAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) SELF EMPLOYED SELF		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELD, PATTY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MART, TX 76664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1245/4629 Rpt: 1248/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELD, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TRINITY UNIVERSITY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELD, STEPHEN <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TRINITY U
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDER-WELLS, SYLVIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79927	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HEALTH CARE COACH		Employer (See Instructions) RVOHEALTH
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, LAURIELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) UPS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, LAURIELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) UPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1246/4629 Rpt: 1249/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code DECATUR, GA 30030	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXEC. ASST. & BOARD LIAISON		Employer (See Instructions) COUNCIL ON RECOVERY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, SHEILA <hr/> Contributor address; City; State; Zip Code PEMBROKE, GA 31321	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, SHEILA <hr/> Contributor address; City; State; Zip Code PEMBROKE, GA 31321	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, SHEILA <hr/> Contributor address; City; State; Zip Code PEMBROKE, GA 31321	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1247/4629 Rpt: 1250/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIERRO, ERIKA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CASE MANAGER		9 Employer (See Instructions) IMS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1248/4629 Rpt: 1251/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10009	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1249/4629 Rpt: 1252/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10009	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1250/4629 Rpt: 1253/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1251/4629 Rpt: 1254/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGLIOZZI, DORY <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10009	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIGUEROA, FRIDA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) TAMIU
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIKES, AMY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205-3103	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FILBERT, SUSAN <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21212	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FILLMAN, VANESSA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1252/4629 Rpt: 1255/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FILLMAN, VANESSA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PEARLAND, TX 77581		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1253/4629 Rpt: 1256/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1254/4629 Rpt: 1257/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, AMY <hr/> 6 Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINCH, TORIA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINDLEY, CARTER <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43221	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINDLEY, JULIE <hr/> Contributor address; City; State; Zip Code PORT ARANSAS, TX 78373	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, JANICE <hr/> Contributor address; City; State; Zip Code WARWICK, RI 02886	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1255/4629 Rpt: 1258/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, MARY ELLEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, MARY ELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, MARY ELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, MARY ELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$41.66
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, NEAL <hr/> Contributor address; City; State; Zip Code NORTH KINGSTOWN, RI 02852	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) LEAD SCIENTIST		Employer (See Instructions) NAVATEK, LTD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1256/4629 Rpt: 1259/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, NEAL <hr/> 6 Contributor address; City; State; Zip Code NORTH KINGSTOWN, RI 02852	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) LEAD SCIENTIST		9 Employer (See Instructions) NAVATEK, LTD
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINE, SUSAN <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINELLI, JULIANNA <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70115	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CHILD PSYCHIATRIST		Employer (See Instructions) TULANE UNIVERSITY SCHOOL OF MEDICINE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINGER, ANN <hr/> Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINGER, MARILYN <hr/> Contributor address; City; State; Zip Code DENTON, TX 76205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ART DEALER		Employer (See Instructions) PDNB GALLERY (OWNER)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1257/4629 Rpt: 1260/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINK, KIMMIE <hr/> 6 Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MARKETING MANAGER		9 Employer (See Instructions) DUN & BRADSTREET
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINK, MARJORIE <hr/> Contributor address; City; State; Zip Code GRANGER, IN 46530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINK, PATRICIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) ARGO DATA RESOURCE CORPORATION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINK, ROZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINK, ROZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1258/4629 Rpt: 1261/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINK, SARA	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code ANN ARBOR, MI 48103		
8 Principal occupation / Job title (See Instructions) FITNESS INSTRUCTOR		9 Employer (See Instructions) ANN ARBOR YMCA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINLAY, ALISON N	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OAKLAND, CA 94610-2417		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINLEY, SHAWN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) CREDIT MANAGER		Employer (See Instructions) JCPENNEY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINLEY, SHAWN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) CREDIT MANAGER		Employer (See Instructions) JCPENNEY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINLEY, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MARYSVILLE, WA 98270		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1259/4629 Rpt: 1262/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINNER, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, NH 03222	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) ELBIT SYSTEMS OF AMERICA
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINNER, DOUGLAS <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, NH 03222	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) ELBIT SYSTEMS OF AMERICA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINNIGAN, TROY <hr/> Contributor address; City; State; Zip Code WINNETKA, IL 60093	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FINZER, MELVERN <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60540	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIORENZA, STEPHANIE <hr/> Contributor address; City; State; Zip Code JERSEY VILLAGE, TX 77040	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL SCIENTIST		Employer (See Instructions) ARCADIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1260/4629 Rpt: 1263/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRES, ZEHONG <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) BUSINESS		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRESTONE, SUSAN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRESTONE, SUSAN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRESTONE, SUSAN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRESTONE, SUSAN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1261/4629 Rpt: 1264/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRESTONE, SUSAN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10012	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRESTONE, SUSAN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ARTIST, ART THERAPIST		Employer (See Instructions) SELF/SEMI-RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRKUS-HICKS, JULIE <hr/> Contributor address; City; State; Zip Code RENO, NV 89506	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DISABLED VETERAN		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRKUS-HICKS, JULIE <hr/> Contributor address; City; State; Zip Code RENO, NV 89506	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DISABLED VETERAN		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRST, BRAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757-7536	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1262/4629 Rpt: 1265/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRTH, RILEY	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code EDGECLIFF VILLAGE, TX 76134		
8 Principal occupation / Job title (See Instructions) PHARMACOVIGILANCE OPERATIONS SPECIALIST		9 Employer (See Instructions) ALCON
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISBECK, MAUREEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346		
Principal occupation / Job title (See Instructions) SPECIAL ASSISTANT		Employer (See Instructions) HARRIS COUNTY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISCHBACH, CHRISTINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PHOENIX, AZ 85023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISCHER, KIRSTEN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT AUSTIN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISCHER, SA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1263/4629 Rpt: 1266/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISH, MARSHA <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30338	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISH, RACHAEL <hr/> Contributor address; City; State; Zip Code DENVER, CO 80231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) RAEM LASH AND BROW
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, CLAIRE <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) ER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, DAMIAN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAND SURVEYOR		Employer (See Instructions) BGE, INC.
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, DAMIAN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAND SURVEYOR		Employer (See Instructions) BGE, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1264/4629 Rpt: 1267/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, DAVID <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) DALLAS COUNTY DEMOCRATIC PARTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DALLAS COUNTY DEMOCRATIC PARTY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, JANE <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98661	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, LESLIE <hr/> Contributor address; City; State; Zip Code HURST, TX 76054	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) P3 HEALTH PARTNERS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, MONTE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1265/4629 Rpt: 1268/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, MONTE <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	7 Amount of Contribution (\$) \$4.20
8 Principal occupation / Job title (See Instructions) BIOCHEMIST		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, MONTE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$4.20
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1266/4629 Rpt: 1269/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GARLAND, TX 75044		
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GARLAND, TX 75044		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, PAUL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LAKELAND, FL 33805		
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1267/4629 Rpt: 1270/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, PAUL <hr/> 6 Contributor address; City; State; Zip Code LAKELAND, FL 33805	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SECURITY		9 Employer (See Instructions) ALLIED UNIVERSAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, PAUL <hr/> Contributor address; City; State; Zip Code LAKELAND, FL 33805	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, SHAWN <hr/> Contributor address; City; State; Zip Code FALLBROOK, CA 92028	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ACORNS2OAKTREES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, SUSAN <hr/> Contributor address; City; State; Zip Code BOISE, ID 83705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED ART TEACHER		Employer (See Instructions) NONE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, TRACEY <hr/> Contributor address; City; State; Zip Code LOS GATOS, CA 95032	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) VARIAN MEDICAL SYSTEMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1268/4629 Rpt: 1271/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, TRACEY	7 Amount of Contribution (\$) \$3.58
6 Contributor address; City; State; Zip Code LOS GATOS, CA 95032		
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) VARIAN MEDICAL SYSTEMS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, TRACY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code COPPELL, TX 75019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISHER, TRACY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COPPELL, TX 75019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISK, JOSEPH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GALVESTON, TX 77554		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISK, JULIE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CEDAR SPRINGS, MI 49319		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1269/4629 Rpt: 1272/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISK, JULIE <hr/> 6 Contributor address; City; State; Zip Code CEDAR SPRINGS, MI 49319	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISK, JULIE <hr/> Contributor address; City; State; Zip Code CEDAR SPRINGS, MI 49319	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISK, JULIE <hr/> Contributor address; City; State; Zip Code CEDAR SPRINGS, MI 49319	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISKE, RUTH <hr/> Contributor address; City; State; Zip Code SACO, ME 04072	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISSCHER, MONIQUE <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1270/4629 Rpt: 1273/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITCH, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITCH, MICHELLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITE, ANNETTE <hr/> Contributor address; City; State; Zip Code BECKVILLE, TX 75631	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HEALTH CARE PROVIDER		Employer (See Instructions) ACROSS THE BOARD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITE, ANNETTE <hr/> Contributor address; City; State; Zip Code BECKVILLE, TX 75631	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HEALTH CARE PROVIDER		Employer (See Instructions) ACROSS THE BOARD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITE, AUSTIN <hr/> Contributor address; City; State; Zip Code PACIFIC PALISADES, CA 90272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HEALTHCARE PARTNERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1271/4629 Rpt: 1274/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITE, JANA <hr/> 6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITE, JANA <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITTING, WENDY <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITTING, WENDY <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITTS, ROBIN <hr/> Contributor address; City; State; Zip Code GAINESVILLE, TX 76241	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MUENSTER ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1272/4629 Rpt: 1275/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, JOHN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77056	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, KATHLEEN <hr/> Contributor address; City; State; Zip Code POTSDAM, NY 13676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, KATHLEEN <hr/> Contributor address; City; State; Zip Code POTSDAM, NY 13676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1273/4629 Rpt: 1276/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, ROBERT <hr/> 6 Contributor address; City; State; Zip Code CRANDALL, TX 75114	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) INSURANCE UNDERWRITER		9 Employer (See Instructions) WEST CONGRESS INSURANCE SERVICES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZGERALD, SUSAN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, KATE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-5178	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, MELANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, SHANNON <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78667	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1274/4629 Rpt: 1277/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, SHANNON <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78667	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, TARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$42.13
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, TARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLABIANO, THYRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLADMARK, MICHAEL <hr/> Contributor address; City; State; Zip Code TOOL, TX 75143-2549	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOLAR DESIGN CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1275/4629 Rpt: 1278/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLADMARK, MICHAEL	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code TOOL, TX 75143-2549		
8 Principal occupation / Job title (See Instructions) SOLAR DESIGN CONSULTANT		9 Employer (See Instructions) SELF-EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLADMARK, MICHAEL J	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code TOOL, TX 75143		
Principal occupation / Job title (See Instructions) SOLAR PV & SUSTAINABILITY DESIGNER/DEVELOPER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLADMARK, MICHAEL J	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TOOL, TX 75143-2549		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) MJFLADMARK LLC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLADMARK, MICHAEL J	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TOOL, TX 75143-2549		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) MJFLADMARK LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAHERTY, ELAINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WILLIAMSTOWN, MA 01267		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1276/4629 Rpt: 1279/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAHERTY, JOAN <hr/> 6 Contributor address; City; State; Zip Code MAYNARD, MA 01754	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDITOR		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAHERTY, JOAN <hr/> Contributor address; City; State; Zip Code MAYNARD, MA 01754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAHERTY, JOAN <hr/> Contributor address; City; State; Zip Code MAYNARD, MA 01754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANAGAN, SUSAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANAGAN, SUSAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1277/4629 Rpt: 1280/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANAGAN, SUSAN <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729-2002	Amount of Contribution (\$) \$130.00
Principal occupation / Job title (See Instructions) PUBLIC ADMINISTRATION		Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES, INC.
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1278/4629 Rpt: 1281/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JIMMY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATION		9 Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES, INC.
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES, INC.
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) AUSTIN CONVENTION ENTERPRISES, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, ROSELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, ROSELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1279/4629 Rpt: 1282/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, ROSELYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANNIGAN, ROSELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANTER, CHARLENE S <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96816	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS		Employer (See Instructions) NA LEI ALOHA FOUNDATION
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANZIG, MARCIA <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAVAN, MARY <hr/> Contributor address; City; State; Zip Code MORRO BAY, CA 93442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1280/4629 Rpt: 1283/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAVAN, MARY <hr/> 6 Contributor address; City; State; Zip Code MORRO BAY, CA 93442	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAVAN, MARY <hr/> Contributor address; City; State; Zip Code MORRO BAY, CA 93442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAVAN, MARY <hr/> Contributor address; City; State; Zip Code MORRO BAY, CA 93442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAVAN, MARY <hr/> Contributor address; City; State; Zip Code MORRO BAY, CA 93442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLECK, STEPHANIE <hr/> Contributor address; City; State; Zip Code WABAN, MA 02468	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1281/4629 Rpt: 1284/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLECKENSTEIN, ALEXA <hr/> 6 Contributor address; City; State; Zip Code BROOKLINE, MA 02445	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLECKENSTEIN, ALEXA <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02445	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEEMAN, BRYCE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) EMS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEISCHMAN, EDWARD K <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, NC 28546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEISHMAN, FRANCINE <hr/> Contributor address; City; State; Zip Code LIDO BEACH, NY 11561	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1282/4629 Rpt: 1285/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, DELRYN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code CARROLLTON, TX 75006		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, FRANCES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LYNNFIELD, MA 01940		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JAMES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SONOMA, CA 95476-5326		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JANIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TIBURON, CA 94920		
Principal occupation / Job title (See Instructions) RETIRED TEACHER!		Employer (See Instructions) SFUSD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JULIA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code OAKBROOK TERRACE, IL 60181		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1283/4629 Rpt: 1286/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JULIA <hr/> 6 Contributor address; City; State; Zip Code OAKBROOK TERRACE, IL 60181	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JULIA <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CREIGHTON		Employer (See Instructions) UNIVERSITY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JULIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, JULIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, NANCY <hr/> Contributor address; City; State; Zip Code WHITEHOUSE STATION, NJ 08889	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		Employer (See Instructions) DAIICHI SANKYO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1284/4629 Rpt: 1287/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, NANCY <hr/> 6 Contributor address; City; State; Zip Code WHITEHOUSE STATION, NJ 08889	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		9 Employer (See Instructions) DAIICHI SANKYO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, NANCY <hr/> Contributor address; City; State; Zip Code WHITEHOUSE STATION, NJ 08889	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		Employer (See Instructions) DAIICHI SANKYO
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEMING, NANCY <hr/> Contributor address; City; State; Zip Code WHITEHOUSE STATION, NJ 08889	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		Employer (See Instructions) DAIICHI SANKYO
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) UNIVERSITY ADMINISTRATOR		Employer (See Instructions) UT AUSTIN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1285/4629 Rpt: 1288/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) UT AUSTIN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) UT AUSTIN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) UT AUSTIN
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1286/4629 Rpt: 1289/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAMES <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAMES <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAMES <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1287/4629 Rpt: 1290/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLETCHER, JAN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1288/4629 Rpt: 1291/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEURY, FAITH	7 Amount of Contribution (\$) \$8.50
6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92131		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLEURY, FAITH	Amount of Contribution (\$) \$8.50
Contributor address; City; State; Zip Code SAN DIEGO, CA 92131		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLINCHUM, RITA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLINCHUM, RITA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLINT, JIM	Amount of Contribution (\$) \$8.34
Contributor address; City; State; Zip Code SEATTLE, WA 98115		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1289/4629 Rpt: 1292/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOCCO, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code GLENDORA, NJ 08029-1214	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) WAREHOUSE STOCK PICKER		9 Employer (See Instructions) HPS,INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORENCE, KRISTIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) THE CHILDRENS CENTER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, AMANDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) ARMBRUST & BROWN PLLC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, AMANDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT DEVELOPER		Employer (See Instructions) GRID UNITED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, ANA <hr/> Contributor address; City; State; Zip Code IDYLLWILD, CA 92549	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) LATINA BLOGGERS CONNECT INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1290/4629 Rpt: 1293/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, ANNA <hr/> 6 Contributor address; City; State; Zip Code SUN VALLEY, CA 91352	7 Amount of Contribution (\$) \$10.70
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, ANTHONY <hr/> Contributor address; City; State; Zip Code ANOKA, MN 55303	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, BEATRICE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, BENJAMIN <hr/> Contributor address; City; State; Zip Code BAY CITY, TX 77414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CYBERSECURITY CONSULTANT/COUNCILMAN/PORK		Employer (See Instructions) BENJAMIN FLORES
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, BENJAMIN <hr/> Contributor address; City; State; Zip Code BAY CITY, TX 77414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CYBERSECURITY CONSULTANT/COUNCILMAN/PORK		Employer (See Instructions) BENJAMIN FLORES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1291/4629 Rpt: 1294/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, DORA <hr/> 6 Contributor address; City; State; Zip Code LAREDO, TX 78043	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LAREDO ISD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, DORA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAREDO ISD
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, DORA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAREDO ISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, JASMIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75224	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VICE CHAIR		Employer (See Instructions) DALLAS COUNTY DEMOCRATIC PARTY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, JASMIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75224	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VICE CHAIR		Employer (See Instructions) DALLAS COUNTY DEMOCRATIC PARTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1292/4629 Rpt: 1295/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, JOSE (JOE)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	
8 Principal occupation / Job title (See Instructions) HEALTHCAREADVISOR & MEDIA CONSULTANT		9 Employer (See Instructions) MOMENTA PLUS/CLARO QUE SI COMMUNICATIONS (SOLE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, JOSE (JOE)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	
Principal occupation / Job title (See Instructions) HEALTHCAREADVISOR & MEDIA CONSULTANT		Employer (See Instructions) MOMENTA PLUS/CLARO QUE SI COMMUNICATIONS (SOLE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, KARLA	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code AUSTIN, TX 78745	
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ESC REGION 13
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, KATHY	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code LUBBOCK, TX 79415	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, KATHY	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code LUBBOCK, TX 79415	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1293/4629 Rpt: 1296/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, LULU <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HENDLER FLORES LAW PLLC
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, LULU <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HENDLER FLORES LAW PLLC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, LULU <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HENDLER FLORES LAW PLLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, NADINE <hr/> Contributor address; City; State; Zip Code BOULDER CITY, NV 89005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, RHONDA <hr/> Contributor address; City; State; Zip Code SELMA, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1294/4629 Rpt: 1297/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, RHONDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SELMA, TX 78154		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, SALLY	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code GRANBURY, TX 76049		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, SANDRA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) DIRECTOR OF HUMAN RESOURCES		Employer (See Instructions) NEW FRONTIERS PUBLIC SCHOOLS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, SILVIA	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code CHULA VISTA, CA 91910		
Principal occupation / Job title (See Instructions) ASSISTANT CLAIMS MANAGWR		Employer (See Instructions) STATE COMPENSATION INSURANCE FUND
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, SONIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1295/4629 Rpt: 1298/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, SONIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) SELF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, SONIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES, STEVE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78758		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) NEIMAN MARCUS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES JR, RAUL	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORES JR, RAUL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1296/4629 Rpt: 1299/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOREZ, AMY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) TRADE MARKETING		9 Employer (See Instructions) WESTLAND DISTILLERY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOREZ, AMY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) TRADE MARKETING		Employer (See Instructions) WESTLAND DISTILLERY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOREZ, AMY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) TRADE MARKETING		Employer (See Instructions) WESTLAND DISTILLERY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOREZ, KARIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SW		Employer (See Instructions) LI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORIO, CONNIE <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1297/4629 Rpt: 1300/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORIS-MOORE, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code CHAPEL HILL, NC 27514	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UNC SCHOOL OF MEDICINE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORMAN, CHERIE <hr/> Contributor address; City; State; Zip Code INDIANOLA, IA 50125	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) CITY GARDENS, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORMAN, CHERIE <hr/> Contributor address; City; State; Zip Code INDIANOLA, IA 50125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) CITY GARDENS, INC.
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORSHEIM, DOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLORSHEIM, DOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1298/4629 Rpt: 1301/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOURNOY, RUTH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOWERS, ANGIE <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOYD, EUGENIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOYD, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) JOHN T FLOYD LAW FIRM
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLY, BILL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1299/4629 Rpt: 1302/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLY, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, COLLEEN <hr/> Contributor address; City; State; Zip Code WALLED LAKE, MI 48390	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, EILEEN <hr/> Contributor address; City; State; Zip Code MEDFORD, NJ 08055	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NONE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, EILEEN <hr/> Contributor address; City; State; Zip Code MEDFORD, NJ 08055	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NONE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, JENIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1300/4629 Rpt: 1303/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, JENIFER <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, JENIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, JENIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, JOHN <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, KAITLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) RESUMESPACE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1301/4629 Rpt: 1304/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, KAITLYN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGEMENT		9 Employer (See Instructions) RESUMESPICE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, KIRSTEN <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) INTERIOR DESIGNER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOGARTY, BRUCE <hr/> Contributor address; City; State; Zip Code CLOVIS, NM 88101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) LINDSEY LAW FIRM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOGARTY, BRUCE <hr/> Contributor address; City; State; Zip Code CLOVIS, NM 88101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) LINDSEY LAW FIRM
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLBERG, STEVEN <hr/> Contributor address; City; State; Zip Code BARNSTABLE COUNTY, MA 02635	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RABBI		Employer (See Instructions) FJC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1302/4629 Rpt: 1305/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLK, MARY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code NASHVILLE, TN 37204		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLLEN, NOELLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code OGILVIE, MN 56358		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLLIN, BILL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SPRING, TX 77382		
Principal occupation / Job title (See Instructions) AIRLINE PILOT		Employer (See Instructions) UNITED AIRLINES
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLLIN, BILL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SPRING, TX 77382		
Principal occupation / Job title (See Instructions) AIRLINE PILOT		Employer (See Instructions) UNITED AIRLINES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLLOWILL, JR, M C	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75378		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1303/4629 Rpt: 1306/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOLSOM, ANNA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) COMAL ISD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOMBAD, MUSAGA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) SHELL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOMEL, TATIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOMEL, TATIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONG, CHARISE <hr/> Contributor address; City; State; Zip Code KENSINGTON, CA 94708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1304/4629 Rpt: 1307/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTAINE, FRANK <hr/> 6 Contributor address; City; State; Zip Code MIDDLEBORO, MA 02346	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTAINE, TERENCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRESIDENT AND CEO		Employer (See Instructions) BUSINESS OPERATING SOLUTIONS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTANA, KAREN <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTANELLA, DOROTHY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTANELLA, DOROTHY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1305/4629 Rpt: 1308/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTANELLA, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTE, BEARS REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTE, BEARS REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTNETTE, LORANN <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FONTNETTE, LORANN <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1306/4629 Rpt: 1309/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOOTE, DOUG <hr/> 6 Contributor address; City; State; Zip Code STAMFORD, CT 06902	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIGITAL STRATEGIST		9 Employer (See Instructions) FOOTPRINT CAMPAIGNS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOOTE, SHARON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, LEE <hr/> Contributor address; City; State; Zip Code MONROE, LA 71201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) SWCA ENVIRONMENTAL CONSULTANTS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, LEE <hr/> Contributor address; City; State; Zip Code MONROE, LA 71201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) SWCA ENVIRONMENTAL CONSULTANTS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, LEE <hr/> Contributor address; City; State; Zip Code MONROE, LA 71201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) SWCA ENVIRONMENTAL CONSULTANTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1307/4629 Rpt: 1310/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, LEE <hr/> 6 Contributor address; City; State; Zip Code MONROE, LA 71201	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CIVIL ENGINEER		9 Employer (See Instructions) SWCA ENVIRONMENTAL CONSULTANTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, WILLIAM <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75963	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) STEPHEN F. AUSTIN STATE UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORBES, WILLIAM <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75963	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) STEPHEN F. AUSTIN STATE UNIVERSITY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, ARLENE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, ARLENE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1308/4629 Rpt: 1311/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, CHARLES	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78758		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, CONSTANCE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HANOVER PARK, IL 60133		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, CURTIS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RAYTHEON
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, CURTIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RAYTHEON (FORMERLY UTC)
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, DAVID	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92110		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1309/4629 Rpt: 1312/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, ERIC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78741	7 Amount of Contribution (\$) \$59.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) SHADY GROVE PARTNERS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, GLORIA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, GLORIA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, JEFFREY <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FOOD SERVICE		Employer (See Instructions) MEB,INC.
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, KAREN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) WATERPR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1310/4629 Rpt: 1313/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, LESLEY <hr/> 6 Contributor address; City; State; Zip Code KINGSBURG, CA 93631	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SECRETARY		9 Employer (See Instructions) ROBERT FORD CRNA, PROF NURSING CORP
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, LIBERTY <hr/> Contributor address; City; State; Zip Code PORT ST LUCIE, FL 34952	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, LIBERTY <hr/> Contributor address; City; State; Zip Code PORT ST LUCIE, FL 34952	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, MARY <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR DIRECTOR		Employer (See Instructions) JANE GOODALL INSTITUTE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, PATRICIA <hr/> Contributor address; City; State; Zip Code LEWES, DE 19958	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1311/4629 Rpt: 1314/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORD, TREASURE <hr/> 6 Contributor address; City; State; Zip Code BEDFORD, TX 76021	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) OPERATIONS DIRECTOR		9 Employer (See Instructions) MISSION CENTRAL
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORDYCE, MICHAEL <hr/> Contributor address; City; State; Zip Code BAXTER, MN 56425-3501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DSP		Employer (See Instructions) ARTESIAN HOMES, LLC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORDYCE, MICHAEL <hr/> Contributor address; City; State; Zip Code BAXTER, MN 56425-3501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DSP		Employer (See Instructions) ARTESIAN HOMES, LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOREMAN, JANET <hr/> Contributor address; City; State; Zip Code LIBERTYVILLE, IL 60048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOREMAN, JANET <hr/> Contributor address; City; State; Zip Code LIBERTYVILLE, IL 60048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1312/4629 Rpt: 1315/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORNACIARI, LINDA <hr/> 6 Contributor address; City; State; Zip Code PORTOLA VALLEY, CA 94028	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORNEY, FRANCINE <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORNEY, FRANCINE <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORNEY, JAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GEOPHYSICIST		Employer (See Instructions) SWIFT ENERGY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORNEY, JAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GEOPHYSICIST		Employer (See Instructions) SWIFT ENERGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1313/4629 Rpt: 1316/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORNUFF, JEFFINER <hr/> 6 Contributor address; City; State; Zip Code BENBROOK, TX 76126	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) AEROSPACE ENGINEER		9 Employer (See Instructions) LOCKHEED MARTIN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORREST, MICHAEL <hr/> Contributor address; City; State; Zip Code LOS ANGELES COUNTY, CA 91326	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORREST, MICHAEL <hr/> Contributor address; City; State; Zip Code LOS ANGELES COUNTY, CA 91326	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORSYTHE LILL, VELETTA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75223	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTNEY, MARY <hr/> Contributor address; City; State; Zip Code MECHANICSBURG, PA 17050	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1314/4629 Rpt: 1317/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTNEY, MARY <hr/> 6 Contributor address; City; State; Zip Code MECHANICSBURG, PA 17050	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTNEY, MARY <hr/> Contributor address; City; State; Zip Code MECHANICSBURG, PA 17050	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTSON GUZZETTI, DEBORAH <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTUNE, IRA <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTUNE, IRA <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1315/4629 Rpt: 1318/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORTUNE, JEAN <hr/> 6 Contributor address; City; State; Zip Code FORT MYERS, FL 33905	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) OWNER/MANAGER		9 Employer (See Instructions) LEHIGH FAMILY GROUP
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSHEE, LINDA <hr/> Contributor address; City; State; Zip Code HATTIESBURG, MS 39404-8825	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSHEE, LINDA <hr/> Contributor address; City; State; Zip Code HATTIESBURG, MS 39404-8825	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSS, JOHN <hr/> Contributor address; City; State; Zip Code BOISE, ID 83714	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) HP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSS, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78715	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1316/4629 Rpt: 1319/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSS, LINDA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78715		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSS, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78715		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSSLER, KERRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) KELLER WILLIAMS
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSSLER, KERRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) KELLER WILLIAMS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSSUM, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660-6396		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) IRELL & MANELLA LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1317/4629 Rpt: 1320/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, CAMILLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) DEPUTY CHIEF OF STAFF		9 Employer (See Instructions) SENATOR BORRIS MILES
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, CAMILLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DEPUTY CHIEF OF STAFF		Employer (See Instructions) SENATOR BORRIS MILES
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, CAROL <hr/> Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, CHERYL <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) SELF EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, CHERYL <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1318/4629 Rpt: 1321/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DONALD <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DONALD <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, DONALD <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, HAYLEY <hr/> Contributor address; City; State; Zip Code YORKTOWN, VA 23693	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, HEIDI <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1319/4629 Rpt: 1322/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code NISKAYUNA, NY 12309	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, OTTIS AND HEIDI <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) LANGERMAN FOSTER ENGINEERING COMPANY
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, OTTIS AND HEIDI <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) LANGERMAN FOSTER ENGINEERING COMPANY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, PHIL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MCC		Employer (See Instructions) COD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, RONDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1320/4629 Rpt: 1323/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, RONDA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78730	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, RUSS <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, STANLEY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30337	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HOLLOWELL FOSTER & HERRING
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, STEVEN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78630	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) FMC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, TESSA <hr/> Contributor address; City; State; Zip Code BENTONVILLE, AR 72712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) POTTER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1321/4629 Rpt: 1324/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOUNTAIN, CINDY <hr/> 6 Contributor address; City; State; Zip Code CLEBURNE, TX 76033	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETAIL MERCHANDISER		9 Employer (See Instructions) CROSSMARK
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOURMIGUE, SUZANNE <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, ASHLEIGH <hr/> Contributor address; City; State; Zip Code GRAND HAVEN, MI 49417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GHAPS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, HUBERT <hr/> Contributor address; City; State; Zip Code CHATTANOOGA, TN 37405	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, MICHAEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60637	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) E-Z TREE RECYCLING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1322/4629 Rpt: 1325/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, MICHAEL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code CHICAGO, IL 60637		
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) E-Z TREE RECYCLING
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, MICHAEL M	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006-3211		
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) MADISON
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, MICHAEL M	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006-3211		
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) MADISON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, NORMA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, THOMAS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1323/4629 Rpt: 1326/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, THOMAS <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLES, NICOLE <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CITY OF SAN ANTONIO
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLES, NICOLE <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CITY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLES, NICOLE <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CITY OF SAN ANTONIO
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, ANDREA <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15206	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SQUIRRELHILLHEALTHCENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1324/4629 Rpt: 1327/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, CAL AND DEE <hr/> 6 Contributor address; City; State; Zip Code LANTANA, TX 76226	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED TEACHER		9 Employer (See Instructions) RETIRED TEACHER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, CAROL <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98683	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, DANIEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077-3713	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, JAMES <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, JILL <hr/> Contributor address; City; State; Zip Code RIVER OAKS, TX 76114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions) ANTHRACITE INVESTMENT COMPANY, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1325/4629 Rpt: 1328/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, JILL <hr/> 6 Contributor address; City; State; Zip Code RIVER OAKS, TX 76114	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		9 Employer (See Instructions) ANTHRACITE INVESTMENT COMPANY, INC.
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, LYNDA <hr/> Contributor address; City; State; Zip Code SARATOGA, CA 95070	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, LYNDA <hr/> Contributor address; City; State; Zip Code SARATOGA, CA 95070	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, LYNDA <hr/> Contributor address; City; State; Zip Code SARATOGA, CA 95070	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, MARTHA <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1326/4629 Rpt: 1329/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, MEDHA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78736	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) IBM
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, MERRIE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) CIRCLE ARTS THEATRE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOX, PAIGE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) FOX AUTO TEAM
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAIDIN, SUSAN <hr/> Contributor address; City; State; Zip Code NY, NY 10023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAME, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1327/4629 Rpt: 1330/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAME, WILLIAM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77034		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAME, WILLIAM	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77034		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAME, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77034		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAME, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77034		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCINII, GLENN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PEACHTREE CORNERS, GA 30092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1328/4629 Rpt: 1331/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCINII, GLENN <hr/> 6 Contributor address; City; State; Zip Code PEACHTREE CORNERS, GA 30092	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, JENNIFER <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, JENNIFER <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, RONALD <hr/> Contributor address; City; State; Zip Code APTOS, CA 95003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) FOOTHILL DEANZA COMMUNITY COLLEGE DISTRICT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, RONALD <hr/> Contributor address; City; State; Zip Code APTOS, CA 95003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) FOOTHILL DEANZA COMMUNITY COLLEGE DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1329/4629 Rpt: 1332/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, SALLY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BERKELEY, CA 94708-1752		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, SALLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BERKELEY, CA 94708-1752		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, SEAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LANSDALE, PA 19446		
Principal occupation / Job title (See Instructions) BIOTECHNICIAN		Employer (See Instructions) MERCK
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, SUSAN FRANCIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HANCOCK, NH 03449-0307		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCISCO, JEANETTE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1330/4629 Rpt: 1333/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCK, HUGH	7 Amount of Contribution (\$) \$3.57
6 Contributor address; City; State; Zip Code GAINESVILLE, FL 32608		
8 Principal occupation / Job title (See Instructions) PHARMACIST		9 Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCK, HUGH	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code GAINESVILLE, FL 32608		
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCO, ROSEANNE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) GLOBAL DIRECTOR		Employer (See Instructions) SALESFORCE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCO, ROSEANNE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) GLOBAL DIRECTOR		Employer (See Instructions) SALESFORCE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCOIS, PATRICIA	Amount of Contribution (\$) \$4.36
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1331/4629 Rpt: 1334/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANSEN, BARBARA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78749-1764		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANSEN, BARBARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749-1764		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ADAM	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) REAL ESTATE DEVELOPER		Employer (See Instructions) RIVER OAKS PROPERTIES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, DAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN RAMON, CA 94583		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1332/4629 Rpt: 1335/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> 6 Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1333/4629 Rpt: 1336/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> 6 Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1334/4629 Rpt: 1337/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1335/4629 Rpt: 1338/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, ELAINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NORTHBROOK, IL 60062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANK, PETER	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code PALM DESERT, CA 92211		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1336/4629 Rpt: 1339/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKE, DEBORAH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78727		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) DEBORAH FRANKE LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKE, SHERRY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKE, SHERRY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKEL, ANDREA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code NEVADA CITY, CA 95959		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKEL, ANDREA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEVADA CITY, CA 95959		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1337/4629 Rpt: 1340/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKEL, ANDREA <hr/> 6 Contributor address; City; State; Zip Code NEVADA CITY, CA 95959	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKEL, ANDREA <hr/> Contributor address; City; State; Zip Code NEVADA CITY, CA 95959	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKEL, ANDREA <hr/> Contributor address; City; State; Zip Code NEVADA CITY, CA 95959	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKEL, DAVID <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60657-1935	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SALES AND ACCOUNT MGMT		Employer (See Instructions) LINKEDIN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKI, JULENE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) SELF, ST. MARY'S LAW SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1338/4629 Rpt: 1341/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKI, JULENE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PRINCIPAL		9 Employer (See Instructions) SELF, ST. MARY'S LAW SCHOOL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, CARRIE <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, CATHY <hr/> Contributor address; City; State; Zip Code MERKEL, TX 79536	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, JOYCE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, JOYCE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1339/4629 Rpt: 1342/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, OLIVE <hr/> 6 Contributor address; City; State; Zip Code UKIAH, CA 95482	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, PAUL <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090-5634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) FRANKLIN
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANKLIN, TANNER <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HIGHTOWER, FRANKLIN, & JAMES, PLLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANSIOLI, FRANK <hr/> Contributor address; City; State; Zip Code CONIFER, CO 80433	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANTZ, MAGGIE <hr/> Contributor address; City; State; Zip Code PONTE VEDRA BEACH, FL 32082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) UNITED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1340/4629 Rpt: 1343/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRARY, MARSHA <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77380	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRASER, SHIRLEY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRASER, SHIRLEY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATANGELO, DAWN <hr/> Contributor address; City; State; Zip Code OLD CHATHAM, NY 12136	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATANGELO, DAWN <hr/> Contributor address; City; State; Zip Code OLD CHATHAM, NY 12136	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1341/4629 Rpt: 1344/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATANGELO, DAWN <hr/> 6 Contributor address; City; State; Zip Code OLD CHATHAM, NY 12136	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATANGELO, DAWN <hr/> Contributor address; City; State; Zip Code OLD CHATHAM, NY 12136	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATANGELO, DAWN <hr/> Contributor address; City; State; Zip Code OLD CHATHAM, NY 12136	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATANGELO, DAWN <hr/> Contributor address; City; State; Zip Code OLD CHATHAM, NY 12136	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATES, RALPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1342/4629 Rpt: 1345/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATES, RALPH	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATES, RALPH	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATINA, CYNTHIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SPRING BRANCH ISD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRATO, JOSEPH	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code MARQUEZ, TX 77865		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAWLEY, CAROLYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SWEETWATER, TX 79556		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1343/4629 Rpt: 1346/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZER, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code FAIRFAX, VA 22030	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZER, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZER, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZIER, ANJIE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) ENVRIO-SOIL STABILIZER
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZIER, ANJIE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) ECOSOIL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1344/4629 Rpt: 1347/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZIER, JANICE <hr/> 6 Contributor address; City; State; Zip Code NEWARK, NJ 07103	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) HEALTHCARE COMPANY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZIER, WINFRED <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDERICK, DOUGLAS <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDERICK, JAY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDERICK, SAMUEL <hr/> Contributor address; City; State; Zip Code STATE COLLEGE, PA 16803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) PENN STATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1345/4629 Rpt: 1348/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDERICKS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDRICKSON, JANYTH <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREDRICKSON, JANYTH <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEARK, KRISTINE <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEARK, KRISTINE <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1346/4629 Rpt: 1349/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEARK, KRISTINE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code ANN ARBOR, MI 48105		
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEARK, KRISTINE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ANN ARBOR, MI 48105		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEARK, KRISTINE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ANN ARBOR, MI 48105		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEBORN, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624-6723		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEBURN, BOB	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PULLMAN, WA 99163		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1347/4629 Rpt: 1350/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEBURN, BOB <hr/> 6 Contributor address; City; State; Zip Code PULLMAN, WA 99163	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREED, DONNA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070-9142	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEDMAN, DEBORAH <hr/> Contributor address; City; State; Zip Code PRINCETON, NJ 08540-5329	Amount of Contribution (\$) \$2,024.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEDMAN, LYNN <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) COLUMBIA UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEDMAN, NANCY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1348/4629 Rpt: 1351/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEDMAN, NANCY <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90024	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) HOUSEWIFE		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREELAND, LAURA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VP FINANCE		Employer (See Instructions) TRANSPLACE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREELAND, MARK <hr/> Contributor address; City; State; Zip Code BREMERTON, WA 98312	Amount of Contribution (\$) \$16.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, JEFF <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90405	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FILM EDITOR		Employer (See Instructions) FILM CRIMINALS, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, JESSE <hr/> Contributor address; City; State; Zip Code RICHMOND, CA 94804	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1349/4629 Rpt: 1352/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, JESSE <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, CA 94804	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, JUDITH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, JUDITH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, MARGARET <hr/> Contributor address; City; State; Zip Code WEST COLUMBIA, TX 77486	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, MARY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1350/4629 Rpt: 1353/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, MARY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, MARY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, MARY <hr/> Contributor address; City; State; Zip Code ATHENS, GA 30605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) US DEPT OF INTERIOR
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, SANDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75233	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, SCOTT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) LEGAL SERVICES		Employer (See Instructions) ARCHER SYSTEMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1351/4629 Rpt: 1354/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, SCOTT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77056	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) LEGAL SERVICES		9 Employer (See Instructions) ARCHER SYSTEMS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, STEVEN <hr/> Contributor address; City; State; Zip Code DEERFIELD BEACH, FL 33442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, STEVEN <hr/> Contributor address; City; State; Zip Code DEERFIELD BEACH, FL 33442	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, STEVEN <hr/> Contributor address; City; State; Zip Code DEERFIELD BEACH, FL 33442	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, STEVEN <hr/> Contributor address; City; State; Zip Code DEERFIELD BEACH, FL 33442	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1352/4629 Rpt: 1355/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, STEVEN <hr/> 6 Contributor address; City; State; Zip Code DEERFIELD BEACH, FL 33442	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, VANESSA N <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) KECK SCHOOL OF MEDICINE OF USC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, VANESSA N <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) KECK SCHOOL OF MEDICINE OF USC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) FREEMAN WEBB COM
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) FREEMAN WEBB COM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1353/4629 Rpt: 1356/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37202	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) FREEMAN WEBB COM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) FREEMAN WEBB COM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) FREEMAN WEBB COM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37202	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) FREEMAN WEBB COM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) FREEMAN WEBB COM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1354/4629 Rpt: 1357/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37202	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) FREEMAN WEBB COM
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREENY, JAMIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) JAMIE FREENY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREER, JILL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREER, JILL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREER, JILL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1355/4629 Rpt: 1358/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREGAPANE, JOAN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREIBERGER, ANN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREISE, CAROL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREISE, CAROL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREISE, CAROL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1356/4629 Rpt: 1359/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREMSTAD, KAREN <hr/> 6 Contributor address; City; State; Zip Code ALAMEDA, CA 94501	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, JEFFERSON <hr/> Contributor address; City; State; Zip Code NEWCASTLE, TX 76372	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, JEFFERSON <hr/> Contributor address; City; State; Zip Code NEWCASTLE, TX 76372	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, MAURICE <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48108	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, MAURICE <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1357/4629 Rpt: 1360/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENCH, MICHELE <hr/> 6 Contributor address; City; State; Zip Code EL CERRITO, CA 94530	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRENKEL, JOAN <hr/> Contributor address; City; State; Zip Code DALY CITY, CA 94015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRESHOUR, NANCY <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREUDENBERGER, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, ANITA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1358/4629 Rpt: 1361/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, AVEN <hr/> 6 Contributor address; City; State; Zip Code BREMERTON, WA 98312-3038	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) GRANT WRITER		9 Employer (See Instructions) SIGHTLINE INSTITUTE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, DANIEL <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, DINAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) VIRTUAL LITIGATION SERVICES
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, PATRICIA <hr/> Contributor address; City; State; Zip Code ATASCADERO, CA 93422	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREY, PATRICIA <hr/> Contributor address; City; State; Zip Code ATASCADERO, CA 93422	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREYMANN, JEFFREY <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94707	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) RADIO PRODUCER		9 Employer (See Instructions) USC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREYMANN, JEFFREY <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) RADIO PRODUCER		Employer (See Instructions) USC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRICK, GINA <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIDRICH, PAMELA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIDRICH, PAMELA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1360/4629 Rpt: 1363/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIDRICH, PAMELA <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIED, BRUCE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIED, DANNY <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94598	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIED, DANNY <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94598	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIED, DANNY <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94598	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1361/4629 Rpt: 1364/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIED, HILARY <hr/> 6 Contributor address; City; State; Zip Code MILFORD, CT 06460	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIED, JANET <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDEN, SANDY G <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SANDY G FRIEDEN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDLAND, DAVID E FRIEDLAND <hr/> Contributor address; City; State; Zip Code MACUNGIE, PA 18062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DISSABLED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, ANNE <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20015	Amount of Contribution (\$) \$1,024.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1362/4629 Rpt: 1365/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DAVID <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DAWN <hr/> Contributor address; City; State; Zip Code HOWARD BEACH, NY 11414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) D. E. SHAW RESEARCH
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DAWN <hr/> Contributor address; City; State; Zip Code HOWARD BEACH, NY 11414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) D. E. SHAW RESEARCH
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DAWN <hr/> Contributor address; City; State; Zip Code HOWARD BEACH, NY 11414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) D. E. SHAW RESEARCH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DEB <hr/> Contributor address; City; State; Zip Code EASTHAMPTON, MA 01027	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1363/4629 Rpt: 1366/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, DEBRA <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070-6890	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) SALES REPRESENTATIVE		9 Employer (See Instructions) PELLA CORPORATION
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, HANNAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, HANNAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, HUGH <hr/> Contributor address; City; State; Zip Code EL PRADO, NM 87529	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAND DEVELOPMENT		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, HUGH <hr/> Contributor address; City; State; Zip Code EL PRADO, NM 87529	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAND DEVELOPMENT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1364/4629 Rpt: 1367/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, IVAN <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, IVAN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, J. KENT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, JAY <hr/> Contributor address; City; State; Zip Code SAN CLEMENTE, CA 92673	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$730.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1365/4629 Rpt: 1368/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, NANCY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) STATE FARM		9 Employer (See Instructions) LAWYER
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDMAN, ROBIN <hr/> Contributor address; City; State; Zip Code APEX, NC 27539	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SPECTRAFORCE TECHNOLOGIES, INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDRICH, JOANN <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89108	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) NSHE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDRICH, MARY ANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDRICH, MARY ANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1366/4629 Rpt: 1369/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDRICH, MARY ANNE	7 Amount of Contribution (\$) \$37.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77096		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDRICH, MARY ANNE	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEDRICH, MARY ANNE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEMEL, FRANK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CANYON, TX 79015		
Principal occupation / Job title (See Instructions) PIPE ORGAN ARCHITECT		Employer (See Instructions) FRANK FRIEMEL DESIGNER
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEMEL, FRANK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CANYON, TX 79015		
Principal occupation / Job title (See Instructions) PIPE ORGAN ARCHITECT		Employer (See Instructions) FRANK FRIEMEL DESIGNER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1367/4629 Rpt: 1370/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEND, CAROL <hr/> 6 Contributor address; City; State; Zip Code LINDALE, TX 75771-5605	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEND, CAROL <hr/> Contributor address; City; State; Zip Code LINDALE, TX 75771-5605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEND, CAROL <hr/> Contributor address; City; State; Zip Code LINDALE, TX 75771-5605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEND, JOHN <hr/> Contributor address; City; State; Zip Code ANGELS CAMP, CA 95222	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) REAL ESTATE APPRAISER		Employer (See Instructions) FRIENDS APPRAISAL SERVICE TEAM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEND, JOHN <hr/> Contributor address; City; State; Zip Code ANGELS CAMP, CA 95222	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) REAL ESTATE APPRAISER		Employer (See Instructions) FRIENDS APPRAISAL SERVICE TEAM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1368/4629 Rpt: 1371/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIEND, JOHN <hr/> 6 Contributor address; City; State; Zip Code ANGELS CAMP, CA 95222	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) REAL ESTATE APPRAISER		9 Employer (See Instructions) FRIENDS APPRAISAL SERVICE TEAM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIERSON, TATIANA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) INSPIRUS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIESEN, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94086	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) APPLE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIESEN, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94086	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) APPLE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIESEN, JAIMESON <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) GAME SHOW NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1369/4629 Rpt: 1372/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIESEN, JAIMESON <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) GAME SHOW NETWORK
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRISCH, HARRY <hr/> Contributor address; City; State; Zip Code YORKTOWN HEIGHTS, NY 10598	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRISCH, HARRY <hr/> Contributor address; City; State; Zip Code YORKTOWN HEIGHTS, NY 10598	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRITSCH, JAMES <hr/> Contributor address; City; State; Zip Code ROCHESTER, MN 55902	Amount of Contribution (\$) \$4.28
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRITSCH, RHONDA <hr/> Contributor address; City; State; Zip Code MEADOWLAKES, TX 78654	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1370/4629 Rpt: 1373/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROGGE, TERESA	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251		
8 Principal occupation / Job title (See Instructions) LETTER CARRIER		9 Employer (See Instructions) USPS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROGGE, TERESA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251		
Principal occupation / Job title (See Instructions) LETTER CARRIER		Employer (See Instructions) USPS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROGGE, TERESA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251		
Principal occupation / Job title (See Instructions) LETTER CARRIER		Employer (See Instructions) USPS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROHLICH, PENELOPE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) PRIVATE PRACTICE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROHLICH, PENELOPE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) PRIVATE PRACTICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1371/4629 Rpt: 1374/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROM, LIZ	7 Amount of Contribution (\$) \$124.00
6 Contributor address; City; State; Zip Code DEL MAR, CA 92014		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRONT, ANNE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 91607		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, EDMUND	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77074-6505		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, JACK	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CONWAY, AR 72032		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, JACK	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code CONWAY, AR 72032		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1372/4629 Rpt: 1375/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) VP TRANSPORTATION		9 Employer (See Instructions) CHRISTIE LITES
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, LUCY <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, PAMELA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FROST, YOLANDA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AUSTIN ISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRUMP, MARY <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) H.I.M TECH		Employer (See Instructions) THE AUSTIN DIAGNOSTIC CLINIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1373/4629 Rpt: 1376/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRUMP, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SUMMIT, NJ 07901-4504	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) EDITOR		9 Employer (See Instructions) MORGAN STANLEY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRY, EDWARD <hr/> Contributor address; City; State; Zip Code PETALUMA, CA 94952	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRY, RENEE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRY, RENEE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRY, WILLIAM <hr/> Contributor address; City; State; Zip Code ITHACA, NY 14850	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) CORNELL UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1374/4629 Rpt: 1377/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, JOEL <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) A/E PROJECT MANAGER		9 Employer (See Instructions) DESIGN GROUP FACILITY SOLUTIONS, INC.
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, JOEL <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) A/E PROJECT MANAGER		Employer (See Instructions) DESIGN GROUP FACILITY SOLUTIONS, INC.
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, JOEL <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) A/E PROJECT MANAGER		Employer (See Instructions) DESIGN GROUP FACILITY SOLUTIONS, INC.
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, JOEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) DESIGN GROUP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, JOEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) DESIGN GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1375/4629 Rpt: 1378/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, PC3214 <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) A/E PROJECT MANAGER		9 Employer (See Instructions) DESIGN GROUP FACILITY SOLUTIONS, INC.
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYAR, PC3214 <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) A/E PROJECT MANAGER		Employer (See Instructions) DESIGN GROUP FACILITY SOLUTIONS, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYE, MARY <hr/> Contributor address; City; State; Zip Code POULSBO, WA 98370	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYE, MARY <hr/> Contributor address; City; State; Zip Code POULSBO, WA 98370	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRYER, KIRSTY <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SERVER		Employer (See Instructions) THE OLD ENGLISH TEA SHOPPE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1376/4629 Rpt: 1379/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUDGE, BARBARA J <hr/> 6 Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, ANA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, ANABEL <hr/> Contributor address; City; State; Zip Code PICO RIVERA, CA 90660	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) PUBLICIST		Employer (See Instructions) LIONSGATE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, CONNIE <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CSR II		Employer (See Instructions) CONTRACT
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, CONNIE <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CSR II		Employer (See Instructions) CONTRACT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1377/4629 Rpt: 1380/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) FIELD SUPERVIDIR		9 Employer (See Instructions) DHHS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, TINA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES-SARKIS, DANIELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HINOJOSA LAW, PLLC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUEYO, RICK <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33629	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROMOTIONS		Employer (See Instructions) SPUNKYFUEL, LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUKUSHIMA, EIICHI <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) ABQMR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1378/4629 Rpt: 1381/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUKUSHIMA, EIICHI	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87119		
8 Principal occupation / Job title (See Instructions) SCIENTIST		9 Employer (See Instructions) ABQMR
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULBRIGHT, RICHARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) NEUROPSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLEM, ROBERT	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) NIH
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLER, EDNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLER, RUTH	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1379/4629 Rpt: 1382/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLER, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97218	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) FINASTRA
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLER, TARA <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FT WORTH ISD
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLERTON, BRAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULLERTON, BRAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, CYNTHIA <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1380/4629 Rpt: 1383/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, ERNEST <hr/> 6 Contributor address; City; State; Zip Code COPPERAS COVE, TX 76522	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, JERRY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, JERRY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, JULIANN <hr/> Contributor address; City; State; Zip Code BUSHLAND, TX 79012	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) BSA HOSPITAL
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, JULIANN <hr/> Contributor address; City; State; Zip Code BUSHLAND, TX 79012	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) BSA HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1381/4629 Rpt: 1384/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, JULIANN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code BUSHLAND, TX 79012		
8 Principal occupation / Job title (See Instructions) CASE MANAGER		9 Employer (See Instructions) BSA HOSPITAL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON, JULIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LAKE ELSINORE, CA 92532		
Principal occupation / Job title (See Instructions) ADMIN		Employer (See Instructions) PECHANGA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTZ, TYLER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTZ, TYLER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) LOCKHEED MARTIN
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUNDERBURK, MARC	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76016-2650		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) LANDPATTERNS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1382/4629 Rpt: 1385/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUNDERBURK, MARC <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76016-2650	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) LANDPATTERNS, INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUNK, JEANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURLONG, ALEXANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURLONG, ALEXANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURLONG, ALEXANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1383/4629 Rpt: 1386/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURLONG, TERESA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ROSWELL, GA 30075		
8 Principal occupation / Job title (See Instructions) BENEFITS SPECIALIST		9 Employer (See Instructions) CBIZ
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURTH, ROBIN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SURRY, ME 04684		
Principal occupation / Job title (See Instructions) RESEARCHER/ARCHIVIST		Employer (See Instructions) STEPHEN KING
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURTWENGLER, ELIZABETH R	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OLATHE, KS 66062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FURUKAWA, THEODORE P	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSCO, CAROL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BERKELEY, CA 94708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1384/4629 Rpt: 1387/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSCO, CAROL <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSCO, PETER <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSILIER, JOHNNY <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77504	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PASADENA ISD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSINATO, BOB <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSINATO, BOB <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1385/4629 Rpt: 1388/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSSELL, JILL <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUSSELL, JILL <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYFE, LORI <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PILOT INSTRUCTOR		Employer (See Instructions) SOUTHWEST AIRLINES
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYFE, LORI <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PILOT INSTRUCTOR		Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYFE, LORI <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PILOT INSTRUCTOR		Employer (See Instructions) SOUTHWEST AIRLINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1386/4629 Rpt: 1389/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYFE, LORI <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PILOT INSTRUCTOR		9 Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYFE, LORI <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PILOT INSTRUCTOR		Employer (See Instructions) SOUTHWEST AIRLINES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYKE, STEVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-2848	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FYKE, STEVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-2848	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G SIMONET, JULIA <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) COZEN O'CONNOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1387/4629 Rpt: 1390/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G SIMS, MARGARITA <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MUSIC TEACHER		9 Employer (See Instructions) TRINITY EPISCOPAL SCHOOL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAASCH, MARY <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55113	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NON PROFIT		Employer (See Instructions) HAMMER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABBARD, SUSAN <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73112	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABER, PAMELA <hr/> Contributor address; City; State; Zip Code MONTOURSVILLE, PA 17754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) LYCOMING COLLEGE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABOURY, MATT <hr/> Contributor address; City; State; Zip Code SOUTH BEND, IN 46614	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TEAM SOLIDS MEMBER		Employer (See Instructions) BRIGHTMARK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1388/4629 Rpt: 1391/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GABOURY, MATT	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code SOUTH BEND, IN 46614		
8 Principal occupation / Job title (See Instructions) TEAM SOLIDS MEMBER		9 Employer (See Instructions) BRIGHTMARK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GACA, KATHLEEN AND RICHARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KELLER, TX 76248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GACA, KATHLEEN AND RICHARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KELLER, TX 76248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GACA, KATHLEEN AND RICHARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KELLER, TX 76248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GADDIS, MARILYN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1389/4629 Rpt: 1392/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GADDIS, MARILYN <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GADDY, LANE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) METALS		Employer (See Instructions) W SILVER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GADSBY, MONICA <hr/> Contributor address; City; State; Zip Code LANGHORNE, PA 19047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GADSBY, MONICA <hr/> Contributor address; City; State; Zip Code LANGHORNE, PA 19047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAEL, MARIA <hr/> Contributor address; City; State; Zip Code ANACORTES, WA 98221	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1390/4629 Rpt: 1393/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAETA, ERIC	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78728		
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) TMF HEALTH QUALITY INSTITUTE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAFF, STACIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAFFEY, JANET	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code POUND RIDGE, NY 10576		
Principal occupation / Job title (See Instructions) INTERIOR DESIGN		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAGNER, VIRGINIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAGNER, VIRGINIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1391/4629 Rpt: 1394/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAIDO, COLLEEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAIDO, COLLEEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAIDO, COLLEEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAINES, WANDA <hr/> Contributor address; City; State; Zip Code CLAYTON, TX 75637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GREETER		Employer (See Instructions) WAL-MART
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAINES, WANDA <hr/> Contributor address; City; State; Zip Code CLAYTON, TX 75637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GREETER		Employer (See Instructions) WAL-MART

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1392/4629 Rpt: 1395/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAIR, PETER <hr/> 6 Contributor address; City; State; Zip Code JEFFERSON, NH 03583	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) OFC ASST		9 Employer (See Instructions) TOWN OF GUILDHALL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALAANG, PAZ <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALAVIZ, ABEL <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALDO, JOE <hr/> Contributor address; City; State; Zip Code ORMOND BEACH, FL 32176	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALDO, JOE <hr/> Contributor address; City; State; Zip Code ORMOND BEACH, FL 32176	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1393/4629 Rpt: 1396/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALDO, JOE <hr/> 6 Contributor address; City; State; Zip Code ORMOND BEACH, FL 32176	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALE, JAMES <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALE, JAMES <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALEN, RITA <hr/> Contributor address; City; State; Zip Code MONROE TOWNSHIP, NJ 08831	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINDO, BROOKE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1394/4629 Rpt: 1397/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINDO, CHERYL <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINDO, CHERYL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINDO, CHERYL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINDO, MARY <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78046	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINSKY, DAVID <hr/> Contributor address; City; State; Zip Code LOWER MERION, PA 19066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1395/4629 Rpt: 1398/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALINSKY, DAVID <hr/> 6 Contributor address; City; State; Zip Code LOWER MERION, PA 19066	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAGHER, ED <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAGHER, MICHEAL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) ATTORNEY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAHER, LAURA <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32817	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) GALLAHER EDGE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLANT, ANN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1396/4629 Rpt: 1399/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLANT, ANN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLASPY, BETH <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLASPY, BETH <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAWAY, ALISON <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAWAY, ALISON <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$28.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1397/4629 Rpt: 1400/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAWAY, ALISON <hr/> 6 Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	7 Amount of Contribution (\$) \$28.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLEGOS, JAIME <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) IMPORTER		Employer (See Instructions) DURANGO IMPORTS, LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLEGOS, JOE <hr/> Contributor address; City; State; Zip Code FORT STOCKTON, TX 79735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) COMANCHE TORTILLA AND TAMALES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLEGOS, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, CAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77026	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1398/4629 Rpt: 1401/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76111	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) SR MGR CUSTOMER MARKETING		9 Employer (See Instructions) TRIXIE PET PRODUCTS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, MARK <hr/> Contributor address; City; State; Zip Code ROXBORO, NC 27573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, MARK <hr/> Contributor address; City; State; Zip Code ROXBORO, NC 27573	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, MARK <hr/> Contributor address; City; State; Zip Code ROXBORO, NC 27573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY, RICHARD <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1399/4629 Rpt: 1402/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLOWAY-KIZZIE, FELICIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77044	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CLAIMS &PROGRAM REP		9 Employer (See Instructions) RAILROAD RETIREMENT BOARD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALUS, CHRISTINE <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALUS, CHRISTINE <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALVAN, IRASEMA <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77503	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALVAN, IRASEMA <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77503	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1400/4629 Rpt: 1403/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALVIN, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20037	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALVIN, JENNIFER <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20037	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALVIS HURTADO, FERNANDO <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DIALIGHT CORP.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAMBER, RUSSELL <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAMEZ, VALERIE <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OFFICE ADMINISTRATOR		Employer (See Instructions) LAW OFCS OF ERNESTO GAMEZ JR PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1401/4629 Rpt: 1404/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAMEZ, VALERIE <hr/> 6 Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OFFICE ADMINISTRATOR		9 Employer (See Instructions) LAW OFCS OF ERNESTO GAMEZ JR PC
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDARA, NANCY <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDARA, NANCY <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDARIA-ESCAMILLA, SARA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDARIA-ESCAMILLA, SARA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1402/4629 Rpt: 1405/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDARIA-ESCAMILLA, SARA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) RRISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDELMAN, JOYCE <hr/> Contributor address; City; State; Zip Code MODESTO, CA 95350	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF JOYCE M GANDELMAN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDHI, JASHVANT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDHI, JASHVANT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDHI, JASHVANT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1403/4629 Rpt: 1406/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANDHI, JASHVANT	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77084		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANESH, SAI	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) EPSOLUTIONS, INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANNON, JOSEPH	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SOUTH BERWICK, ME 03908-1840		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) AT&T CONSULTING
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANOBSIK, KENDRA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ELYRIA, OH 44035-2069		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) PENFED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANS, EUPHEMIA	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code MCKINNEY, TX 75071		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1404/4629 Rpt: 1407/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANT, ALAN <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANT, ALAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANT, MARIA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) CONTRAN CORPORATION
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANT, MARIA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) CONTRAN CORP
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANTT, MELANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1405/4629 Rpt: 1408/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANTT, MELANIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAO, JACK <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SOFTWARE CONSULTANTS		Employer (See Instructions) NETSTAR SYSTEM
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAO, ROBERT <hr/> Contributor address; City; State; Zip Code WHARTON, TX 77488	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAO, XIAOHONG <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARAY, MONICA <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20910	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) LEGISLATIVE DIRECTOR		Employer (See Instructions) CONGRESS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1406/4629 Rpt: 1409/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARBARINO, SUNNY <hr/> 6 Contributor address; City; State; Zip Code COLDSPRING, TX 77331	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARBER, MARTHA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARBER, MARTHA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARBER, MARTHA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77249-0066	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1407/4629 Rpt: 1410/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ADRIAN	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77249-0066		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ANNE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ANNE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, BARBARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MARIPOSA, CA 95338		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, DANNA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AMARILLO, TX 79110		
Principal occupation / Job title (See Instructions) DONOR SERVICES		Employer (See Instructions) CAL FARLEY'S

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1408/4629 Rpt: 1411/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, DANNA	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code AMARILLO, TX 79110		
8 Principal occupation / Job title (See Instructions) DONOR SERVICES		9 Employer (See Instructions) CAL FARLEY'S
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, DANNA	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code AMARILLO, TX 79110		
Principal occupation / Job title (See Instructions) DONOR SERVICES		Employer (See Instructions) CAL FARLEY'S
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, DOMINGO	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75247		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF DOMINGO GARCIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ELAINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PRIVATE SCHOOL
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ELAINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1409/4629 Rpt: 1412/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ELIDA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, FRANCEE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205-5424	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IMPORTER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, FRANCISCO <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) REGIONAL MANAGER		Employer (See Instructions) CITY OF DALLAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, GILBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) GHA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, GILBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1410/4629 Rpt: 1413/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, HERMINIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345		
8 Principal occupation / Job title (See Instructions) HR SPECIALIST		9 Employer (See Instructions) CLEVELAND ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, JAIME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LAREDO, TX 78045		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) J. CRUZ & ASSOCIATES, LLC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, JEANNETTE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78244-3299		
Principal occupation / Job title (See Instructions) DIRECTOR: COMMUNICATIONS		Employer (See Instructions) UP PARTNERSHIP
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, JOSHUA	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415		
Principal occupation / Job title (See Instructions) SENIOR EXECUTIVE ASSISTANT		Employer (See Instructions) COUNTY OF BEXAR
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, JOSHUA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) DUABLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1411/4629 Rpt: 1414/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, KRISTI <hr/> 6 Contributor address; City; State; Zip Code FALLBROOK, CA 92028	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, LEA <hr/> Contributor address; City; State; Zip Code CLARKS SUMMIT, PA 18411	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) OLD FORGE SCHOOL DISTRICT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, LYDIANA <hr/> Contributor address; City; State; Zip Code WESLEY CHAPEL, FL 33545	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MARCIAL <hr/> Contributor address; City; State; Zip Code UNION BEACH, NJ 07735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MARCIAL <hr/> Contributor address; City; State; Zip Code UNION BEACH, NJ 07735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1412/4629 Rpt: 1415/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MARCIAL <hr/> 6 Contributor address; City; State; Zip Code UNION BEACH, NJ 07735	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MARCIAL <hr/> Contributor address; City; State; Zip Code UNION BEACH, NJ 07735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MD, CATALINA E <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MD, CATALINA E <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, MONICA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE QA ANALYST		Employer (See Instructions) PEARSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1413/4629 Rpt: 1416/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, NANCY <hr/> 6 Contributor address; City; State; Zip Code BURLESON, TX 76028	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) CITY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, RAMONA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALL SAINTS EPISCOPAL SCHOOL
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, RAMONA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALL SAINTS EPISCOPAL SCHOOL
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, RENEE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF-EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, RENEE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1414/4629 Rpt: 1417/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, ROBERT R <hr/> 6 Contributor address; City; State; Zip Code MCALLEN, TX 78502	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICE OF BOBBY GARCIA, PC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SAMUEL <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SAMUEL <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SAMUEL <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SAMUEL <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1415/4629 Rpt: 1418/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SARA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LEGAL OPERATIONS		9 Employer (See Instructions) GOOGLE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, SHEILA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90038	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) MENTAL HEALTH THERAPIST		Employer (See Instructions) HEALING AND GROWTH INC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, VIOLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA WILLIAMS, ATALIA <hr/> Contributor address; City; State; Zip Code SUNNYVALE, TX 75182	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GARCIA LEGAL GROUP PC
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCKEN, KNUTE <hr/> Contributor address; City; State; Zip Code VENTURA, CA 93003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1416/4629 Rpt: 1419/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARD, JO <hr/> 6 Contributor address; City; State; Zip Code VALLEY VILLAGE, CA 91607	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARD, JO <hr/> Contributor address; City; State; Zip Code VALLEY VILLAGE, CA 91607	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARD, MARCIA <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDINER, THOMAS <hr/> Contributor address; City; State; Zip Code KEMMERER, WY 83101	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDINER, THOMAS <hr/> Contributor address; City; State; Zip Code KEMMERER, WY 83101	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1417/4629 Rpt: 1420/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, CATHY <hr/> 6 Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33407	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, JILL <hr/> Contributor address; City; State; Zip Code CORNWALL, NY 12518	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, JILL <hr/> Contributor address; City; State; Zip Code CORNWALL, NY 12518	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, JULIE <hr/> Contributor address; City; State; Zip Code PALMER, TX 75152	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, JULIET <hr/> Contributor address; City; State; Zip Code CYPRESS, CA 90630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LOS ALAMTIOS USD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1418/4629 Rpt: 1421/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640-6120	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-6120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-6120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-6120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-6120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1419/4629 Rpt: 1422/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640-6120	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARG, GAURAV <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) CASCADE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARG, KUMAR <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) SCHMIDT FUTURES
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARGIULO, MICHELLE <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARGIULO, MICHELLE <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1420/4629 Rpt: 1423/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNAND, ALLYSON <hr/> 6 Contributor address; City; State; Zip Code MURPHY, TX 75094	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ALLEN BOONE HUMPHRIES ROBINSON LLP
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ALLEN BOONE HUMPHRIES ROBINSON LL
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ALLEN BOONE HUMPHRIES ROBINSON LLP
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ALLEN BOONE HUMPHRIES ROBINSON LL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1421/4629 Rpt: 1424/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARNER, MEREDITH <hr/> 6 Contributor address; City; State; Zip Code RANCHO SANTA FE, CA 92067	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, BRUCE <hr/> Contributor address; City; State; Zip Code RICHLAND, WA 99354	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) BRUCE GARRETT
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, JUDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, JUDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1422/4629 Rpt: 1425/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, KAREN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, PETER <hr/> Contributor address; City; State; Zip Code WINSLOW, ME 04901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, PETER <hr/> Contributor address; City; State; Zip Code WINSLOW, ME 04901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1423/4629 Rpt: 1426/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, SAM <hr/> 6 Contributor address; City; State; Zip Code BURNET, TX 78611	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, VICTORIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) STATE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, VICTORIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) STATE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, VICTORIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) STATE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ANDREW <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1424/4629 Rpt: 1427/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ANDREW <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ANDREW <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, CHRISTIE R <hr/> Contributor address; City; State; Zip Code FERNDALE, WA 98248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, GINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, GINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1425/4629 Rpt: 1428/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> 6 Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1426/4629 Rpt: 1429/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> 6 Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT <hr/> Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1427/4629 Rpt: 1430/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, ROBERT	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, TANYA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON TEXAS, TX 77055		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRISON, TANYA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON TEXAS, TX 77055		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARROW, SUZANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WEBSTER, NY 14580		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARROW, SUZANNE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WEBSTER, NY 14580		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1428/4629 Rpt: 1431/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARROW, SUZANNE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code WEBSTER, NY 14580		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARROW, SUZANNE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WEBSTER, NY 14580		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARROW, SUZANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WEBSTER, NY 14580		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARROW, SUZANNE	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code WEBSTER, NY 14580		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRY, BETH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LYNN, MA 01904		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1429/4629 Rpt: 1432/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARSIDE, BARRY <hr/> 6 Contributor address; City; State; Zip Code MISSION VIEJO, CA 92692	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARTH, CECILE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARTH, CECILE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARTNER, DANIEL <hr/> Contributor address; City; State; Zip Code ORO VALLEY, AZ 85755	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARTNER, DIANE <hr/> Contributor address; City; State; Zip Code BLOOMFIELD HILLS, MI 48302	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1430/4629 Rpt: 1433/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARTON, THERESA	7 Amount of Contribution (\$) \$14.29
6 Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73131		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) INTEGRIS MEDICAL GROUP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARTON, THERESA	Amount of Contribution (\$) \$14.29
Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73131		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) INTEGRIS MEDICAL GROUP
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARVER, C M	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055		
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) CG 7600 LP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARVEY, KYLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COLUMBUS, OH 43201		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARVIN, FRANCES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1431/4629 Rpt: 1434/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARVIN, JAMES <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76244	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARVIN, JAMES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARY, EMILY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205-3612	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARY, EMILY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205-3612	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARY, PAUL <hr/> Contributor address; City; State; Zip Code WILLINGBORO, NJ 08046	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1432/4629 Rpt: 1435/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, CHERISSE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) FARM BUREAU BANK
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, CHERISSE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) FARM BUREAU BANK
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, CHERISSE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) FARM BUREAU BANK
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, DANIEL <hr/> Contributor address; City; State; Zip Code CONROE, TX 77306	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, DOROTHY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1433/4629 Rpt: 1436/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, ERIKA <hr/> 6 Contributor address; City; State; Zip Code TOMBALL, TX 77375	7 Amount of Contribution (\$) \$15.25
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, ERIKA <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, HECTOR <hr/> Contributor address; City; State; Zip Code TYLER, TX 75705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) CONCRETE ATTRACTIONS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, HECTOR <hr/> Contributor address; City; State; Zip Code TYLER, TX 75705	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) OFFICE		Employer (See Instructions) CONCRETE ATTRACTIONS
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, HECTOR <hr/> Contributor address; City; State; Zip Code TYLER, TX 75705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) CONCRETE ATTRACTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1434/4629 Rpt: 1437/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JAIME <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77520	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROMOTER		9 Employer (See Instructions) BRAND CHAMPION MARKETING
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JAIME <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77520	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROMOTER		Employer (See Instructions) BRAND CHAMPION MARKETING
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JOSE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JOSE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) LAW OFFICE OF JOSE GARZA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1435/4629 Rpt: 1438/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, JOSE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78752	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TRAVIS COUNTY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, LUPE <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, LUZ <hr/> Contributor address; City; State; Zip Code TYLER, TX 75705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, LUZ <hr/> Contributor address; City; State; Zip Code FLINT, TX 75762	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) CONCRETE ATTRACTIONS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, MARGARET <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1436/4629 Rpt: 1439/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, OSCAR <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, ROBERT <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, ROBERT <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, ROGERIO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) TEXAS STATE DIRECTOR		Employer (See Instructions) GIFFORDS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, ROGERIO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1437/4629 Rpt: 1440/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, RUDY D <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ADMIN		9 Employer (See Instructions) HSCS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, TAMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARZA, TINA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLERICAL		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASCO, LARRY <hr/> Contributor address; City; State; Zip Code PALOS VERDES ESTATES, CA 90274	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASCO, LARRY <hr/> Contributor address; City; State; Zip Code PALOS VERDES ESTATES, CA 90274	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1438/4629 Rpt: 1441/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASKAMP, MARCY <hr/> 6 Contributor address; City; State; Zip Code LACONIA, NH 03246	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASPARETTI, ANGELA <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGN		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASS, CYNDI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASS, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256-9542	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASS, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256-9542	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1439/4629 Rpt: 1442/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASSAN, LARRY <hr/> 6 Contributor address; City; State; Zip Code CAMARILLO, CA 93010	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) LARRY GASSAN PHOTO/WHITE GLOVE SCANNING
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASSAN, LARRY <hr/> Contributor address; City; State; Zip Code CAMARILLO, CA 93010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) LARRY GASSAN PHOTO/WHITE GLOVE SCANNING
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASSAN, LARRY <hr/> Contributor address; City; State; Zip Code CAMARILLO, CA 93010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) LARRY GASSAN PHOTO/WHITE GLOVE SCANNING
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASTON, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASTON, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1440/4629 Rpt: 1443/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GASTON, STEPHANIE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code ARLINGTON, TX 76001		
8 Principal occupation / Job title (See Instructions) STAFF		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT ARLINGTON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATCHEL, LYLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NEVADA, OH 44849		
Principal occupation / Job title (See Instructions) LAB WORKER		Employer (See Instructions) ALLOWAY ENVIRONMENTAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATLIN, JAKE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) WEST OAKS HOSPITAL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATLING, GINGER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARGYLE, TX 76226		
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) SAP
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATLING, GINGER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARGYLE, TX 76226		
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) SAP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1441/4629 Rpt: 1444/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATLING, GINGER <hr/> 6 Contributor address; City; State; Zip Code ARGYLE, TX 76226-1353	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATTA, JOHN <hr/> Contributor address; City; State; Zip Code NILES, OH 44446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATTIS, JIM <hr/> Contributor address; City; State; Zip Code CHARLESTONCHARLESTON, AR 72933	Amount of Contribution (\$) \$16.66
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATWOOD, RACHEL <hr/> Contributor address; City; State; Zip Code RESTON, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) CAMBIUM ASSESSMENT, INC.
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATWOOD, RACHEL <hr/> Contributor address; City; State; Zip Code RESTON, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) CAMBIUM ASSESSMENT, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1442/4629 Rpt: 1445/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATWOOD, RACHEL <hr/> 6 Contributor address; City; State; Zip Code RESTON, VA 20191	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TECHNICAL WRITER		9 Employer (See Instructions) CAMBIUM ASSESSMENT, INC.
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATWOOD, RACHEL <hr/> Contributor address; City; State; Zip Code RESTON, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) CAMBIUM ASSESSMENT, INC.
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GATZ, KAREN L <hr/> Contributor address; City; State; Zip Code ANNANDALE, VA 22003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUDET, CAROLINE <hr/> Contributor address; City; State; Zip Code MALDEN, MA 02148	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MEDICAL DEVICE ENGINEER		Employer (See Instructions) BOSTON SCIENTIFIC CORPORATION
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUDET, CAROLINE <hr/> Contributor address; City; State; Zip Code MALDEN, MA 02148	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MEDICAL DEVICE ENGINEER		Employer (See Instructions) BOSTON SCIENTIFIC CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1443/4629 Rpt: 1446/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAULDIN, GAY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUTREAU, KERA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR DIRECTOR		Employer (See Instructions) GHP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVENDA, ROBERT <hr/> Contributor address; City; State; Zip Code MERIZO, DC 20000	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVENTA, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DEAN OF STUDENTS		Employer (See Instructions) AUSTIN PRESBYTERIAN THEOLOGICAL SEMINARY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVIN, TIM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1444/4629 Rpt: 1447/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVRILOV, MABEL <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVRILOV, MABEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVRILOV, MABEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVRILOV, MABEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAVRILOV, MABEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1445/4629 Rpt: 1448/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAWEL, STANISLAW <hr/> 6 Contributor address; City; State; Zip Code HUMBLE, TX 77396	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) EXXONMOBIL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAWORSKI, JENNIFER <hr/> Contributor address; City; State; Zip Code MADISON, WI 53719	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT SUPERVISOR		Employer (See Instructions) UW HEALTH
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAY, MARYANN <hr/> Contributor address; City; State; Zip Code COWAN, TN 37318	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAY, MARYANN <hr/> Contributor address; City; State; Zip Code COWAN, TN 37318	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAY, WAYNE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012-0694	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) UNIVERSITY OF TEXAS AT ARLINGTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1446/4629 Rpt: 1449/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYDEN, CRYSTAL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76120	7 Amount of Contribution (\$) \$94.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYDEN, CRYSTAL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76120	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYDOS-FEDAK, NINA <hr/> Contributor address; City; State; Zip Code NORTH PRAIRIE, WI 53153	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYDOS-FEDAK, NINA <hr/> Contributor address; City; State; Zip Code NORTH PRAIRIE, WI 53153	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYLORD, JULIE <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965-3234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1447/4629 Rpt: 1450/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYNOR, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYNOR, CHRISTINE <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYNOR, YVETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYNOR, YVETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAYTAN, ISAAC <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1448/4629 Rpt: 1451/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARING, CHARLES <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75228	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) FIGARI + DAVENPORT
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARING, CHARLES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FIGARI + DAVENPORT
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARY, WARREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WINSTON & STRAWN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARY, WARREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) N/A
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARY, WARREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1449/4629 Rpt: 1452/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARY, WARREN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77095		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) N/A
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEARY, WARREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77095		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) N/A
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEBALLE, LESLIE	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEBHARD, CAROLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEER, SARAH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) PHILANTHROPY		Employer (See Instructions) RAINWATER CHARITABLE FOUNDATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1450/4629 Rpt: 1453/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEHRING, KATHERINE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEHRING, KATHERINE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEIGER, BARBARA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEIGER, BARBARA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEIGER, DOREEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76116		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1451/4629 Rpt: 1454/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GELBARD, E <hr/> 6 Contributor address; City; State; Zip Code OXFORD, MS 38655	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GELBARD, SARA <hr/> Contributor address; City; State; Zip Code BARRYVILLE, NY 12719	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) R E BROKER		Employer (See Instructions) THE CORCORAN GROUP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GELLER, MELISA <hr/> Contributor address; City; State; Zip Code SEA CLIFF, NY 11579	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LSA		Employer (See Instructions) REAL ESTATE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEMIGNANI, EUFAULA <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22312	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEMKOW, HOLLIS <hr/> Contributor address; City; State; Zip Code ARLINGTON HEIGHTS, IL 60004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1452/4629 Rpt: 1455/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENDE, GRETCHEN <hr/> 6 Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENERA, RICHARD <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TELLER		Employer (See Instructions) WELLS FARG
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, ADRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) EXCIS
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, JAY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, JAY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1453/4629 Rpt: 1456/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1454/4629 Rpt: 1457/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NONE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NONE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NONE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1455/4629 Rpt: 1458/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTRY, KAREN	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703-1962		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GENTZ, DON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PORT ARANSAS, TX 78208		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEOFFRAY, JEANNE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF-EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, ALBERT R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TRUMANSBURG, NY 14886		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, ALBERT R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TRUMANSBURG, NY 14886		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1456/4629 Rpt: 1459/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, HEIDI <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19103	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FINANCIAL CONSULTANT		Employer (See Instructions) RALPH S. O'CONNOR & ASSOCIATES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FINANCIAL CONSULTANT		Employer (See Instructions) RALPH S. O'CONNOR & ASSOCIATES
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FINANCIAL CONSULTANT		Employer (See Instructions) RALPH S. O'CONNOR & ASSOCIATES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1457/4629 Rpt: 1460/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGE, RENEE <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77373	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT ASST		9 Employer (See Instructions) ANGLIA HOMES LP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1458/4629 Rpt: 1461/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DEERFIELD, IL 60015		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DEERFIELD, IL 60015		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DEERFIELD, IL 60015		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEORGEVICH, MEG	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DEERFIELD, IL 60015		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEPHARDT, ANN	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code FRANKLIN, MA 02038		
Principal occupation / Job title (See Instructions) RETIRED COLLEGE AVP		Employer (See Instructions) NASSAU COMMUNITY COLLEHE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1459/4629 Rpt: 1462/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEPHARDT, ANN <hr/> 6 Contributor address; City; State; Zip Code FRANKLIN, MA 02038	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) RETIRED COLLEGE AVP		9 Employer (See Instructions) NASSAU COMMUNITY COLLEHE
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEPHARDT, ANN <hr/> Contributor address; City; State; Zip Code FRANKLIN, MA 02038	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED COLLEGE AVP		Employer (See Instructions) NASSAU COMMUNITY COLLEHE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEPHARDT, ANN <hr/> Contributor address; City; State; Zip Code FRANKLIN, MA 02038	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED COLLEGE AVP		Employer (See Instructions) NASSAU COMMUNITY COLLEHE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GEPPERT, LANCE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERAGHTY, MATT <hr/> Contributor address; City; State; Zip Code SOUTHBURY, CT 06488	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1460/4629 Rpt: 1463/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERAN, JENNIFER	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612		
8 Principal occupation / Job title (See Instructions) ENVIRONMENTAL ENGINEER		9 Employer (See Instructions) SAGE ATC ENVIRONMENTAL CONSULTING
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERAN, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612		
Principal occupation / Job title (See Instructions) ENVIRONMENTAL ENGINEER		Employer (See Instructions) SAGE ATC ENVIRONMENTAL CONSULTING
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERARD, BRYAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) PERVASIVE DEVELOPER		Employer (See Instructions) PEARSON
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERARD, BRYAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) PERVASIVE DEVELOPER		Employer (See Instructions) PEARSON
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERARD, BRYAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) PERVASIVE DEVELOPER		Employer (See Instructions) PEARSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1461/4629 Rpt: 1464/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERARD, BRYAN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PERVASIVE DEVELOPER		9 Employer (See Instructions) PEARSON
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERARD, MICHAEL <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) BIRDVILLE ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERARD, MICHAEL <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) BIRDVILLE ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERBER, ANDREA <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERBER, ANDREA <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1462/4629 Rpt: 1465/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERETZ, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERETZ, ELIZABETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERETZ, ELIZABETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERETZ, ELIZABETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERINGER, CAROL <hr/> Contributor address; City; State; Zip Code CLAREMORE, OK 74017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1463/4629 Rpt: 1466/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERLACH, BETTY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERLACH, BETTY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERLACH, BETTY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMAN, SHERRY <hr/> Contributor address; City; State; Zip Code LAKESIDE, CA 92040	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ML CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMANN, PHIL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) INTEL CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1464/4629 Rpt: 1467/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMANO, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code BELLEVUE, WA 98006	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMANO, JOSEPH <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMANO, JOSEPH <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERMANY, ROBIN <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST EDUCATOR		Employer (See Instructions) TEXAS TECH UNIVERSITY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERNALE, CHARMAINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) TX WORKFORCE COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1465/4629 Rpt: 1468/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERNALE, CHARMAINE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78754	7 Amount of Contribution (\$) \$6.50
8 Principal occupation / Job title (See Instructions) DATA ANALYST		9 Employer (See Instructions) TX WORKFORCE COMMISSION
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERNALE, CHARMAINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) TX WORKFORCE COMMISSION
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERNALE, CHARMAINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) TX WORKFORCE COMMISSION
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERRITY, MAEVE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75039	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) PURE INDULGENCE AESTHETICS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERSHON, VICKI <hr/> Contributor address; City; State; Zip Code GLADWYNE, PA 19035	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1466/4629 Rpt: 1469/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERSHON, VICKI <hr/> 6 Contributor address; City; State; Zip Code GLADWYNE, PA 19035	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERSON, LORA ANN & STEVE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERSON, RICHARD <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469-4810	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MAINTENANCE		Employer (See Instructions) GARZA MGMT CORP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERSTENHABER, SUZI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WALDMAN SMALLWOOD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GERSTL, JERRY <hr/> Contributor address; City; State; Zip Code MCFARLAND, WI 53558	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1467/4629 Rpt: 1470/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GESSLEIN, RANDI <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11225	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GESWENDER, ERIC <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) MCDONALD ELECTRIC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GESWENDER, ERIC <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) MCDONALD ELECTRIC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHAGAR, AMANDA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OKTA, INC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHAGAR, AMANDA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OKTA, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1468/4629 Rpt: 1471/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHANI, SHARIQ <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77407	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NON PROFIT		9 Employer (See Instructions) MINARET FOUNDATION
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHAVIDEL, KELLY <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHAVIDEL, KELLY <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHISELIN, AMY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GHOSH, SUMITA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SALAZAR IP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1469/4629 Rpt: 1472/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIANCOLA, LOUIS <hr/> 6 Contributor address; City; State; Zip Code PROVIDENCE, RI 02906	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIANNESCHI III, LAWRENCE R <hr/> Contributor address; City; State; Zip Code KENNESAW, GA 30152	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIANNESCHI III, LAWRENCE R <hr/> Contributor address; City; State; Zip Code KENNESAW, GA 30152	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIASSON, DIANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIASSON, DIANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1470/4629 Rpt: 1473/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIASSON, DIANE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBBONS, HEIDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBBONS, HEIDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBBONS, HEIDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBBONS, LORETTA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1471/4629 Rpt: 1474/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBBS, DELBERT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75238	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) DELBERT GIBBS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBBS, GARY <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, CAROL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LEADER		Employer (See Instructions) SAUMC
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, JANELLE <hr/> Contributor address; City; State; Zip Code ROCKDALE, TX 76567	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TISD
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, JANELLE <hr/> Contributor address; City; State; Zip Code ROCKDALE, TX 76567	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1472/4629 Rpt: 1475/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, JOHN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code LUBBOCK, TX 79407		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) GIBSONFIRM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79407		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) GIBSONFIRM
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79407		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) GIBSONFIRM
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIBSON, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79407		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) GIBSONFIRM
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIFFORD, DONALD	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1473/4629 Rpt: 1476/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIFFORD, MARTHA <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11201	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIFFORDS, GLORIA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85726	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HISTORIAN		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIGL, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIGL, JENNIFER <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75010	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, ALICIA <hr/> Contributor address; City; State; Zip Code BROOKER, FL 32622	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CULTIVATION		Employer (See Instructions) AYR WELLNESS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1474/4629 Rpt: 1477/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, LINSEY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GARLAND, TX 75043		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) GARLAND ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, MARY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SONOMA, CA 95476		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, MARY	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code SONOMA, CA 95476		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SONOMA, CA 95476		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, MARY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SONOMA, CA 95476		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1475/4629 Rpt: 1478/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, MARY <hr/> 6 Contributor address; City; State; Zip Code SONOMA, CA 95476	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, PRESSLY <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28207	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBERT, PRESSLY <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28207	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1476/4629 Rpt: 1479/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1477/4629 Rpt: 1480/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIMBERLY <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, KIMBERLY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, NICHOLAS <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, NICHOLAS <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, NICHOLAS <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1478/4629 Rpt: 1481/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, RALPH <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) NATERA
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILBY, RALPH <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) NATERA
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILDER, MARVELLA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILDER, MARVELLA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILDER, RODRICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1479/4629 Rpt: 1482/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILDER, RODRICK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILDIN, MARSHA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHING ARTIST		Employer (See Instructions) TEACHERS & WRITERS COLLABORATIVE
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILDIN, MARSHA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHING ARTIST		Employer (See Instructions) TEACHERS & WRITERS COLLABORATIVE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES, EDDIE M <hr/> Contributor address; City; State; Zip Code CORONA, CA 92879	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES, EDDIE M <hr/> Contributor address; City; State; Zip Code CORONA, CA 92879	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1480/4629 Rpt: 1483/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES, EDDIE M <hr/> 6 Contributor address; City; State; Zip Code CORONA, CA 92879	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES, KATHY <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES, KATHY <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILES-STRAIGHT, CAROL <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63132-2103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILFILLAN, SUSAN <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH ASSOCIATE PROFESSOR		Employer (See Instructions) WASHINGTON UNIVERSITY SCHOOL OF MEDICINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1481/4629 Rpt: 1484/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILG, LAWRENCE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILL, FLORA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILL, FLORA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILL, LAUREN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GARDENER		Employer (See Instructions) LAUREN GILL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILL, LENA <hr/> Contributor address; City; State; Zip Code EASTON, MD 21601	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1482/4629 Rpt: 1485/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILL, ORION <hr/> 6 Contributor address; City; State; Zip Code TACOMA, WA 98418	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLASPY, BETSY <hr/> Contributor address; City; State; Zip Code REDMOND, WA 98052-3852	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GILLASPY RHODE FADDIS & BENN
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLASPY, BETSY <hr/> Contributor address; City; State; Zip Code REDMOND, WA 98052-3852	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GILLASPY RHODE FADDIS & BENN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLESPIE, KEVIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLESPIE, LINDA <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1483/4629 Rpt: 1486/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLESPIE, LINDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356		
8 Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLESPIE, MARY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOSWELL, AR 72556		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLESPIE, MARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BOSWELL, AR 72556		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETT, EDWARD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33702		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNITEDHEALTHCARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETT, EDWARD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33702		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNITEDHEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1484/4629 Rpt: 1487/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETT, EDWARD <hr/> 6 Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33702	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UNITEDHEALTHCARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETTE, BARBARA L <hr/> Contributor address; City; State; Zip Code WADSWORTH, OH 44281	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETTE, BARBARA L <hr/> Contributor address; City; State; Zip Code WADSWORTH, OH 44281	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETTE, PATRICIA <hr/> Contributor address; City; State; Zip Code THE DALLES, OR 97058	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) COLUMBIA GORGE ESD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLETTE, PATRICIA <hr/> Contributor address; City; State; Zip Code THE DALLES, OR 97058	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) COLUMBIA GORGE ESD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1485/4629 Rpt: 1488/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLEY, KATIE <hr/> 6 Contributor address; City; State; Zip Code FRIONA, TX 79035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) FRIONA ISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLIAM, LANCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) CONCENTRIC COMMUNITY ADVISORS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLIAM, LANCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) CONCENTRIC COMMUNITY ADVISORS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLIGAN, REX <hr/> Contributor address; City; State; Zip Code PLAIN, WI 53577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLILAND JR, LUKIN T <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1486/4629 Rpt: 1489/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLILAND JR, LUKIN T	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) SELF EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLIS, DR JJOHN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75287		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, ALAN H	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, ALAN H	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, ALAN H	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1487/4629 Rpt: 1490/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, BONNIE <hr/> 6 Contributor address; City; State; Zip Code WAYNE, NJ 07470	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CLINICAL DATA MANAGEMENT		9 Employer (See Instructions) NOVELLA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, BONNIE <hr/> Contributor address; City; State; Zip Code WAYNE, NJ 07470	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL DATA MANAGEMENT		Employer (See Instructions) NOVELLA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, MICHAEL <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75089	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, NANCY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, RHONDA <hr/> Contributor address; City; State; Zip Code EL LAGO, TX 77586	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1488/4629 Rpt: 1491/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILMORE, SANDY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$28.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILSON, BONNIE <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) VOLUNTEER DIRECTOR		Employer (See Instructions) CAPITAL CITY VILLAGE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILSON, BONNIE <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) VOLUNTEER DIRECTOR		Employer (See Instructions) CAPITAL CITY VILLAGE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILSON, BONNIE <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) VOLUNTEER DIRECTOR		Employer (See Instructions) CAPITAL CITY VILLAGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIMMLER, CHRISTINE <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1489/4629 Rpt: 1492/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIMSON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIMSON, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINDER, ANDREA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXEC. ASSIST.		Employer (See Instructions) WENTWOOD CAPITAL
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINER, MARIA-ELENA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHD STUDENT		Employer (See Instructions) UT LBJ PUBLIC PUBLIC AFFAIRS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINER, MARIA-ELENA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHD STUDENT		Employer (See Instructions) UT LBJ PUBLIC PUBLIC AFFAIRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1490/4629 Rpt: 1493/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINERIS, DENISE <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINERIS, DENISE <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINGER, VICTORIA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINGER, VICTORIA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINGER, VICTORIA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1491/4629 Rpt: 1494/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINN, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78732	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) JOURNALIST		9 Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINSBERG, ELIZABETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF ELIZABETH CALDCLEUGH
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINSBERG, ELIZABETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF ELIZABETH CALDCLEUGH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINSBERG, JOEL <hr/> Contributor address; City; State; Zip Code HURST, TX 76054	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT SUPPORT		Employer (See Instructions) TREND MICRO
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINSBERG, MARY <hr/> Contributor address; City; State; Zip Code NYC, NY 10022	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1492/4629 Rpt: 1495/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINYARD, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINYARD, CYNTHIA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINYARD, CYNTHIA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GINYARD, CYNTHIA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIORDANO, FRED <hr/> Contributor address; City; State; Zip Code SARASOTA, FL 34248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1493/4629 Rpt: 1496/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIPSON, JOANNE <hr/> 6 Contributor address; City; State; Zip Code RENO, NV 89509	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIRARD, JEFFREY <hr/> Contributor address; City; State; Zip Code ELGIN, IL 60124	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIRARD, JEFFREY <hr/> Contributor address; City; State; Zip Code ELGIN, IL 60124	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIRARDOT, TIMOTHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) PIANO TEACHER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIRDEN, JULIE <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85718	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) BACHS NURSERY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1494/4629 Rpt: 1497/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIROUARD, JOY <hr/> 6 Contributor address; City; State; Zip Code SHAVANO PARK, TX 78231	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SALES ADMINISTRATION		9 Employer (See Instructions) ASR SYSTEMS INC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIROUX, YVONNE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE SPECIALIST		Employer (See Instructions) STATE FARM INSURANCE COMPANIES
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIROUX, YVONNE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE SPECIALIST		Employer (See Instructions) STATE FARM INSURANCE COMPANIES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GITCHELL, JUDITH <hr/> Contributor address; City; State; Zip Code WOODSTOCK, IL 60098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GITTINGER, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) DELL EMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1495/4629 Rpt: 1498/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIUFFRE, FRANCES <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, MA 02476	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIUGNI, CHRISTINE <hr/> Contributor address; City; State; Zip Code BRONX, NY 10463	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRAINING MANAGER		Employer (See Instructions) AMA
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIUSTI, SARA <hr/> Contributor address; City; State; Zip Code VASHON, WA 98070	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) AD TECH		Employer (See Instructions) ISPOT.TV
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLADSTEIN, YISRAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) HAZARD MITIGATION PLANNER		Employer (See Instructions) GRANTWORKS, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLADWELL, ELIZABETH <hr/> Contributor address; City; State; Zip Code GOODE, VA 24556	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PERSONAL PROPERTY APPRAISER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1496/4629 Rpt: 1499/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLAESE, LANCE <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79924	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASPIE, LORI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) CIVIL SERVICE		Employer (See Instructions) US TREASURY DEPT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, CLAUDIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, CLAUDIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, CLAUDIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1497/4629 Rpt: 1500/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, DAVID <hr/> 6 Contributor address; City; State; Zip Code NEEDHAM, MA 02492	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, DONNA <hr/> Contributor address; City; State; Zip Code WASHINGTON, TX 77880	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASS, FRANK <hr/> Contributor address; City; State; Zip Code ALBANY, OR 97321	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROCESS ENGINEER		Employer (See Instructions) HP INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASSCOCK, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$28.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLASSNER, SHARON <hr/> Contributor address; City; State; Zip Code MORTON GROVE, IL 60053	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1498/4629 Rpt: 1501/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLATZ, DEREK <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CUSTOMER EXPERIENCE ANALYST		9 Employer (See Instructions) GM FINANCIAL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLATZ, DEREK <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CUSTOMER EXPERIENCE ANALYST		Employer (See Instructions) GM FINANCIAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLEASON, KAREN <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55422	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLEASON, MARNIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLEN DENNING, DON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) LOCKE LORD LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1499/4629 Rpt: 1502/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENDINNING, JANE CAROL <hr/> 6 Contributor address; City; State; Zip Code LATHAM, NY 12110	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENDINNING, JANE CAROL <hr/> Contributor address; City; State; Zip Code LATHAM, NY 12110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, LAURA <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLICK, KAYLENE <hr/> Contributor address; City; State; Zip Code BARTLESVILLE, OK 74006	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) CITY LETTER CARRIER		Employer (See Instructions) USPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1500/4629 Rpt: 1503/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOEGE, WILLIAM P <hr/> 6 Contributor address; City; State; Zip Code SANTA MARIA, CA 93455	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOEGE, WILLIAM P <hr/> Contributor address; City; State; Zip Code SANTA MARIA, CA 93455	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOSOFF, HARRIET <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOVER, CHRISTINE <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOVER, CHRISTINE <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AUTHOR/EDITOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1501/4629 Rpt: 1504/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOVER, CHRISTINE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LEANDER, TX 78641		
8 Principal occupation / Job title (See Instructions) AUTHOR/EDITOR		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLUCK, NORA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SANTA FE, NM 87506		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLUCK, NORA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SANTA FE, NM 87506		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLUCK, NORA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SANTA FE, NM 87506		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLUCKSMAN, ROY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAKE ARIEL, PA 18436		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) OWNER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1502/4629 Rpt: 1505/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLUNT, MEGAN <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DATA ENTRY LEAD		9 Employer (See Instructions) DISCOVERY RECORDS, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GNAT, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) WRITER-EDITOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOAD, HEIDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOAD, HEIDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOAD, HEIDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214-3626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1503/4629 Rpt: 1506/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOBBELL, PHYLLIS <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37205	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOCHA, TIMOTHY <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRADUATE TEACHING ASSOCIATE		Employer (See Instructions) THE OHIO STATE UNIVERSITY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOCHA, TIMOTHY <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRADUATE TEACHING ASSOCIATE		Employer (See Instructions) THE OHIO STATE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODDIN, KAREN <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODDIN, KAREN <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1504/4629 Rpt: 1507/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, CANDICE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code CONROE, TX 77385		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SIMPLICITY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, CANDICE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CONROE, TX 77385		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SIMPLICITY
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JOHN	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) JOHN GODFREY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JOHN	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) JOHN GODFREY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1505/4629 Rpt: 1508/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JOHN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JUSTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT/TREASURER		Employer (See Instructions) BARILLA MANAGEMENT INC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JUSTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT/TREASURER		Employer (See Instructions) BARILLA MANAGEMENT INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JUSTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT/TREASURER		Employer (See Instructions) BARILLA MANAGEMENT INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, JUSTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT/TREASURER		Employer (See Instructions) BARILLA MANAGEMENT INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1506/4629 Rpt: 1509/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, MARK <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75252	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, WILLIAM <hr/> Contributor address; City; State; Zip Code SPRING, TX 77389	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODFREY, WILLIAM <hr/> Contributor address; City; State; Zip Code SPRING, TX 77389	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODWIN, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODWIN, GRIFF <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) GHBA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1507/4629 Rpt: 1510/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODWIN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code DUBLIN, CA 94568	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) XEROX
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOEHL, NANCY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOERNER, JON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) OUTLINES MENSWEAR
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOERTNER, JO ANN <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20916	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WEB APPLICATION DEVELOPER		Employer (See Instructions) CTIA THE WIRELESS ASSOCIATION
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOERTNER, JO ANN <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20916	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WEB APPLICATION DEVELOPER		Employer (See Instructions) CTIA THE WIRELESS ASSOCIATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1508/4629 Rpt: 1511/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOERTZ, DONNA BRYANT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT		9 Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFF, DONALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FIELDCOMM GROUP, INC.
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFF, DONALD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FIELDCOMM GROUP, INC.
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFF, ERIC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ERIC WINTERS GOFF LLC
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFF, ERIC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ERIC WINTERS GOFF LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1509/4629 Rpt: 1512/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, JESSICA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code VICTORIA, TX 77901		
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) DTR
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, JESSICA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code VICTORIA, TX 77901		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) DTR
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOGATE, MAYURESH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DELL EMC
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOGATE, MAYURESH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DELL EMC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOKA, KATE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code BRISBANE, CA 94005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1510/4629 Rpt: 1513/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLD, BARRY <hr/> 6 Contributor address; City; State; Zip Code LAKE MARY, FL 32746	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, ANNETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CITY ADMINISTRATOR		Employer (See Instructions) CITY OF ARCOLA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, ELLEN <hr/> Contributor address; City; State; Zip Code STAMFORD, CT 06902-1617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, KENNETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, LESLEY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009-3125	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1511/4629 Rpt: 1514/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, NANCY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90066		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1512/4629 Rpt: 1515/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, NANCY <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, SARA <hr/> Contributor address; City; State; Zip Code MANHASSET, NY 11030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDBERG, WENDY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10001	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CCO		Employer (See Instructions) IHEART
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDEAN, PAUL <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28277	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) PACEOMATIC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDEN, GLORIA <hr/> Contributor address; City; State; Zip Code REDWOOD CITY, CA 94062	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1513/4629 Rpt: 1516/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDEN, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code VOLCANO, HI 96785	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDEN, MICHAEL <hr/> Contributor address; City; State; Zip Code DENVER, CO 80220-4543	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) NORDIC GLOBAL CONSULTING
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDING, CONSTANCE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10026	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDING, CONSTANCE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10026	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDING, KATHY <hr/> Contributor address; City; State; Zip Code LITTLETON, CO 80130	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1514/4629 Rpt: 1517/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDMAN, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code CHATSORTH, CA 91311	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) TBI AIRPORT MGMT/BHA BURBANK
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDMAN, CYNTHIA <hr/> Contributor address; City; State; Zip Code CHATSORTH, CA 91311	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TBI AIRPORT MGMT/BHA BURBANK
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDMAN, WENDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) WENCO APPAREL INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDSTEIN, BRIDGETTE <hr/> Contributor address; City; State; Zip Code MINERAL WELL, TX 76067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) EVOLVE SPM
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDSTEIN, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77082	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1515/4629 Rpt: 1518/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDSTICKER, ANDI <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SCHOOL COUNSELOR		9 Employer (See Instructions) PLANO ISD
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDWATER, JOE/CHERYL <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDWATER, JOSEF <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDWATER, JOSEF <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLDWATER, JOSEF <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1516/4629 Rpt: 1519/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLIAN, AUGUSTA <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77382	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLIGHTLY, MAXINE <hr/> Contributor address; City; State; Zip Code HALLSVILLE, TX 75650	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLIGHTLY, MAXINE <hr/> Contributor address; City; State; Zip Code HALLSVILLE, TX 75650	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLL, MARK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78266	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLLHARDT, KURT <hr/> Contributor address; City; State; Zip Code UNION CITY, CA 94587	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) CERTEK SOFTWARE DESIGNS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1517/4629 Rpt: 1520/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLLHARDT, KURT <hr/> 6 Contributor address; City; State; Zip Code UNION CITY, CA 94587	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) CERTEK SOFTWARE DESIGNS, INC.
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOLOFF, DIANE <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMES, KARYN <hr/> Contributor address; City; State; Zip Code HAYWARD, CA 94544	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CLERICAL		Employer (See Instructions) TITAN
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, CHARLES <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, CHARLES <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1518/4629 Rpt: 1521/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, DAUNA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78268	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, KENNETH <hr/> Contributor address; City; State; Zip Code CONROE, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, LAURA <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) SOUTH TEXAS COLLEGE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, LAURA <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) SOUTH TEXAS COLLEGE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, MERI <hr/> Contributor address; City; State; Zip Code MISSION, TX 78572-2965	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) MERIS TAX SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1519/4629 Rpt: 1522/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, PLACIDO	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) GRANTS MANAGER		9 Employer (See Instructions) TMP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOMEZ, PLACIDO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) GRANTS MANAGER		Employer (See Instructions) TMP
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONDOL, JOHN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOLLY LAKE RANCH, TX 75765		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONDOL, JOHN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOLLY LAKE RANCH, TX 75765		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONIN, PAUL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1520/4629 Rpt: 1523/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONTANG, ALLAN <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92131	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONTERMAN, STEVE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONTERMAN, STEVE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONTERMAN, STEVE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, ALFRED <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) MANAGER OF PUBLIC SAFETY		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1521/4629 Rpt: 1524/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, BARBARA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SAISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, BERNARD <hr/> Contributor address; City; State; Zip Code CHULA VISTA, CA 91913	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, DAVID <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77503	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, KATHLEEN <hr/> Contributor address; City; State; Zip Code SHERWOOD, AR 72120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, KATHLEEN <hr/> Contributor address; City; State; Zip Code SHERWOOD, AR 72120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1522/4629 Rpt: 1525/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code SHERWOOD, AR 72120	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, VICTOR <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALES, VICTOR <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, ARACELI <hr/> Contributor address; City; State; Zip Code WEST COVINA, CA 91790	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, AYDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) AG3 GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1523/4629 Rpt: 1526/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, CHARLES <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) OGLETREE DEAKINS, PC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, CHRISTINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, CINTHIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS OPERATIONS		Employer (See Instructions) MAS POWER STRATEGIES
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, DELLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) 211 SPECIALIST		Employer (See Instructions) UNITED WAY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, EDWARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77270	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SHERIFF		Employer (See Instructions) HARRIS COUNTY SHERIFFS OFFICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1524/4629 Rpt: 1527/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, FERNANDO <hr/> 6 Contributor address; City; State; Zip Code SUGARLAND, TX 77478	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) SELF EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, FERNANDO <hr/> Contributor address; City; State; Zip Code SUGARLAND, TX 77478	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, GORDON <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, HECTOR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) OCI GROUP
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, HON. ROSIE SPEEDLIN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) BEXAR COUJTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1525/4629 Rpt: 1528/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, HON. ROSIE SPEEDLIN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) BEXAR COUJTY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, IVAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LOGISTICS SUPERVISOR		Employer (See Instructions) DEPARTMENT OF DEFENSE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JAIME <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JAVAN <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) INVIO
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JAVAN <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) INVIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1526/4629 Rpt: 1529/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JESSICA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75203	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JESSICA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75203	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JOEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DENNY'S CORPORATION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JONATHAN <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS LAND LAW PLLC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JONATHAN <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS LAND LAW PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1527/4629 Rpt: 1530/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, JULIO	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703		
8 Principal occupation / Job title (See Instructions) DATA SCIENTIST		9 Employer (See Instructions) CHARM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, KAREN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CHESTERFIELD, NJ 08515		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, KENITH	Amount of Contribution (\$) \$45.38
Contributor address; City; State; Zip Code TEMPLE, TX 76502		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, LUCY	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code MCALLEN, TX 78504		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, LUZ	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COMPTON, CA 90220		
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) LA COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1528/4629 Rpt: 1531/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MANNY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DIRECTOR, STATE GOVERNMENT & COMMUNITY		9 Employer (See Instructions) WESTERN GOVERNORS UNIVERSITY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MANUEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF REGIONAL OPERATIONS		Employer (See Instructions) WESTERN GOVERNORS UNIVERSITY
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MAYTE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MAYTE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, OSCAR <hr/> Contributor address; City; State; Zip Code FORT STOCKTON, TX 79735	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1529/4629 Rpt: 1532/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CHEMIST		9 Employer (See Instructions) ARMY
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, PATRICIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) ARMY
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, RUBEN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) COUNTY TAX COLLECTOR		Employer (See Instructions) COUNTY OF EL PASO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, SARAH <hr/> Contributor address; City; State; Zip Code HIGHLAND, MD 20777	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SARAH GONZALEZ
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, SYLVIA Z <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) GISO REALTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1530/4629 Rpt: 1533/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZZ, JUAN <hr/> 6 Contributor address; City; State; Zip Code WESLACO, TX 78596	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOCH, J. ERIC <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MENTAL HEALTH COUNSELOR		Employer (See Instructions) UTMB
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOCH, J. ERIC <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MENTAL HEALTH COUNSELOR		Employer (See Instructions) UTMB
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOCH, J. ERIC <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MENTAL HEALTH COUNSELOR		Employer (See Instructions) UTMB
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODE, JOHN <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1531/4629 Rpt: 1534/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODFARB, JAY <hr/> 6 Contributor address; City; State; Zip Code PHOENIX, AZ 85012	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		9 Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODFRIEND, GARY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-1104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODFRIEND, GARY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-1104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODFRIEND, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODGOLD, ALAN <hr/> Contributor address; City; State; Zip Code TARPON SPRINGS, FL 34688	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1532/4629 Rpt: 1535/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODGOLD, ALAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TARPON SPRINGS, FL 34688		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODIN, DEBRA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) DOOR, INC.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODING, CONNIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HUTTO, TX 78634		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, DANYA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MALDEN, MA 02148		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DANYA GOODMAN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, ELISA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90064		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1533/4629 Rpt: 1536/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, JOHN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209-6015	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209-6015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, KATHERINE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10024	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1534/4629 Rpt: 1537/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code MANHATTAN, NY 10024	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) MEDIATOR		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, KATHERINE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10024	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN-GILL, NANCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) HR MGMT.		Employer (See Instructions) TRAVIS CO.
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODNIGHT, DARYL <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODRICH, LAURIE <hr/> Contributor address; City; State; Zip Code ORWIGSBURG, PA 17961	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BIOLOGIST		Employer (See Instructions) HAWK MTN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1535/4629 Rpt: 1538/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODSON, PAULA <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODSON, PAULA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODSON, PAULA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWELL, L NEWTON <hr/> Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91360	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) WOOLER BRANDS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWELL, L NEWTON <hr/> Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) WOOLERBRANDS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1536/4629 Rpt: 1539/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWELL, L NEWTON <hr/> 6 Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91360	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) WOOLER BRANDS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWELL, L NEWTON <hr/> Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91360	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWELL, L NEWTON <hr/> Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, AUDREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, AUDREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1537/4629 Rpt: 1540/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, CAROL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, GEORGE <hr/> Contributor address; City; State; Zip Code HULL, MA 02045-1409	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, KATHERINE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, KATHERINE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1538/4629 Rpt: 1541/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, LAURA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77095	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, SHARON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) UTMB
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, SHARON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, SHARON <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, TERRIS <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76501	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) CENTRAL COUNTIES SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1539/4629 Rpt: 1542/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, THOMAS <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75074	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SOGETI
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, THOMAS <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SOGETI
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, THOMAS <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SOGETI
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, THOMAS <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SOGETI
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, VIKKI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF: GOODWIN & GOODWIN REAL ESTATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1540/4629 Rpt: 1543/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOLEY, JANELLE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code BROOKLYN, NY 11230		
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) JPMORGAN CHASE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOLSBEE, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ABILENE, TX 79606		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOLSBEE, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ABILENE, TX 79606		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOLSBEE, LINDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ABILENE, TX 79608		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOLSBEE, LINDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ABILENE, TX 79608		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1541/4629 Rpt: 1544/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOSSEN, CAROL <hr/> 6 Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOOSSENS, CHRISTINE <hr/> Contributor address; City; State; Zip Code GLOVERSVILLE, NY 12078	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) LEONARD BUS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORCZYCA, SUSAN <hr/> Contributor address; City; State; Zip Code BOISE, ID 83703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORCZYNSKI, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, ALLEN <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1542/4629 Rpt: 1545/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, ALLEN <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, AUDREY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) APPLIED ECONOMICS CONSULTING GROUP, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, CHARLENE <hr/> Contributor address; City; State; Zip Code ALDIE, VA 20105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, CHARLENE <hr/> Contributor address; City; State; Zip Code ALDIE, VA 20105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, CHARLENE <hr/> Contributor address; City; State; Zip Code ALDIE, VA 20105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1543/4629 Rpt: 1546/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, DAVID <hr/> 6 Contributor address; City; State; Zip Code ELK GROVE, CA 95624	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, DEBRA <hr/> Contributor address; City; State; Zip Code MILLSBORO, DE 19966	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, HEIDI <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, HEIDI <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, JANE <hr/> Contributor address; City; State; Zip Code INDIAN TRAIL, NC 28079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1544/4629 Rpt: 1547/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, JOLENE <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, MARSHA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, MARSHA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, GAIL <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, GAIL <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1545/4629 Rpt: 1548/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78749		
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) LONE STAR BEAN
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) LONE STAR BEAN
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) LONE STAR BEAN
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) LONE STAR BEAN
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1546/4629 Rpt: 1549/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) LONE STAR BEAN
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORE, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) LONE STAR BEAN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORESKI, LENA <hr/> Contributor address; City; State; Zip Code HERNDON, VA 20170	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORESKI, LENA <hr/> Contributor address; City; State; Zip Code HERNDON, VA 20170	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORESKI, LENA <hr/> Contributor address; City; State; Zip Code HERNDON, VA 20170	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1547/4629 Rpt: 1550/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORESKI, LENA <hr/> 6 Contributor address; City; State; Zip Code HERNDON, VA 20170	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORESKI, LENA <hr/> Contributor address; City; State; Zip Code HERNDON, VA 20170	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORGAS, CAROLYN <hr/> Contributor address; City; State; Zip Code JAMESTOWN, CA 95327	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, CORNELIA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) PHARMALEX
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, TERRY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TUTOR AND LAW SCHOOL COACH		Employer (See Instructions) GORMAN ADVISORY LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1548/4629 Rpt: 1551/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORNDT, JEAN <hr/> 6 Contributor address; City; State; Zip Code EAST SPRINGFIELD, PA 16411	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORNICK, TODD <hr/> Contributor address; City; State; Zip Code SHENANDOAH, TX 77384	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORNICK, TODD <hr/> Contributor address; City; State; Zip Code SHENANDOAH, TX 77384	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORTON, NICK <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95616	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CALIFORNIA EMERGENCY PHYSICIANS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORTON, NICK <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95616	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CALIFORNIA EMERGENCY PHYSICIANS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1549/4629 Rpt: 1552/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORZNY, TED <hr/> 6 Contributor address; City; State; Zip Code RIVERSIDE COUNTY, CA 92549	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSEWEHR, ROCIO <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROCIO AT LAW PC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSEWEHR, ROCIO <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROCIO AT LAW PC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSHORN, JOHN <hr/> Contributor address; City; State; Zip Code ANAHEIM, CA 92804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONTENT MANAGER		Employer (See Instructions) COLBI TECHNOLOGIES
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSE, THOMAS <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1550/4629 Rpt: 1553/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSE, THOMAS <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSE, THOMAS <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSE, THOMAS <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSE, THOMAS <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSE, THOMAS <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1551/4629 Rpt: 1554/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSETT, GLORIA <hr/> 6 Contributor address; City; State; Zip Code PLEASANTON, CA 94588	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSETT, GLORIA <hr/> Contributor address; City; State; Zip Code PLEASANTON, CA 94588	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSETT, GLORIA <hr/> Contributor address; City; State; Zip Code PLEASANTON, CA 94588	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSETT, GLORIA <hr/> Contributor address; City; State; Zip Code PLEASANTON, CA 94588	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOSSLEE, PAGETT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1552/4629 Rpt: 1555/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOTOWKO, PETER <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOTOWKO, PETER <hr/> Contributor address; City; State; Zip Code WACO, TX 76705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOTTLIEB, AMY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOUDELOCK, GLORIA <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30349	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOULD, CHRISTINA <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) HOPE HOUSE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1553/4629 Rpt: 1556/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOULD, EMILY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
8 Principal occupation / Job title (See Instructions) CONTENT STRATEGIST		9 Employer (See Instructions) GITHUB
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOULD, EMILY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) CONTENT STRATEGIST		Employer (See Instructions) GITHUB
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOULD, KARI	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75006		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS COUNTY JUVENILE DEPARTMENT
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOULD, MICHAEL	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code HOUSTON, TX 77018		
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) META
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOYETTE, MARTIN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94116		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CA DEPT. OF JUSTICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1554/4629 Rpt: 1557/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRABER, LAURA <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		9 Employer (See Instructions) FISH
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRABER, LAURA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) FISH
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRABER, LOEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRACE, KATHY <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80304	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1555/4629 Rpt: 1558/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78744		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1556/4629 Rpt: 1559/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78744	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADFORD, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADY, MAMIE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60653	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1557/4629 Rpt: 1560/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAEF, JANIS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAEF, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAEF, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1558/4629 Rpt: 1561/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728-4457	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728-4457	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1559/4629 Rpt: 1562/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAF, MARY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAFF, PHILIP <hr/> Contributor address; City; State; Zip Code FULTON, MD 20759	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) JHU APL
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAFF, PHILIP <hr/> Contributor address; City; State; Zip Code FULTON, MD 20759	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) JHU APL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAFFAM, NICOLE <hr/> Contributor address; City; State; Zip Code WISCASSET, ME 04578	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CUSTODIAN		Employer (See Instructions) PEN BAY BUILDERS
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, CINDY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VP OF HUMAN RESOURCES		Employer (See Instructions) ISSI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1560/4629 Rpt: 1563/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, CINDY <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) VP OF HUMAN RESOURCES		9 Employer (See Instructions) ISSI
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, CORETTA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78466	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, DYLAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ACRISURE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1561/4629 Rpt: 1564/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, GLYNN <hr/> 6 Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CAMPGROUND MANAGER		9 Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, GLYNN <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CAMPGROUND MANAGER		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, HEATHER <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR NETWORK STANDARDS		Employer (See Instructions) CVS HEALTH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, HELEN <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) EARLY CHILCARE EDUCATOR		Employer (See Instructions) SOUND CHILDCARE SOLUTIONS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, KERTRINA <hr/> Contributor address; City; State; Zip Code FLORENCE, SC 29501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) LIMESTONE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1562/4629 Rpt: 1565/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, SUSAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAJSKI, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAMMER, GREGORY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1563/4629 Rpt: 1566/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANADO, SHIRLEY A <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75036	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANADO, SHIRLEY A <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANGER, J WELDON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JONES GRANGER LAW FIRM
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANGER, J WELDON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JONES GRANGER LAW FIRM
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANGER, JOHN WELDON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JONES GRANGER

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1564/4629 Rpt: 1567/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANGER, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) DEALER RECALL SOLUTIONS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANGER, WAYNE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SUPERINTENDENT		Employer (See Instructions) CITY OF PFLUGERVILLE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANOVSKY, NANCY <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77807	Amount of Contribution (\$) \$25.99
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, CATHLEEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MEDICAL SALES		Employer (See Instructions) AMERITA SPECIALTY INFUSION
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, CATHLEEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) SALES EXECUTIVE		Employer (See Instructions) AT HOME HEALTHCARE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1565/4629 Rpt: 1568/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, DONOVAN <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37220	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) BOOKSELLER		9 Employer (See Instructions) BARNES AND NOBLE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, DONOVAN <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37220	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) BOOKSELLER		Employer (See Instructions) BARNES AND NOBLE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JENNIFER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FOUNDATION DIRECTOR, CEO & PARALEGAL		Employer (See Instructions) JUST JEN MEDIA & CONSULTING
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, JONATHAN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) KATHY GRANT GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1566/4629 Rpt: 1569/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, KATHY	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) LOBBYIST		9 Employer (See Instructions) KATHY GRANT GROUP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, KATHY	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) KATHY GRANT GROUP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, KATHY	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) KATHY GRANT GROUP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, KATHY	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) KATHY GRANT GROUP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANT, PHILIP	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BROOKLYN, OR 11217		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1567/4629 Rpt: 1570/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, DANIEL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HAIKU, HI 96708		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, DANIEL	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code HAIKU, HI 96708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, DANIEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HAIKU, HI 96708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, DANIEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HAIKU, HI 96708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, DANIEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HAIKU, HI 96708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1568/4629 Rpt: 1571/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, DANIEL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HAIKU, HI 96708		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANTHAM, ROBIN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TAMPA, FL 33629		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRASS, COLLEEN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code TOMBALL, TX 77375		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRASSMUCK, SALLY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) VHA
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRATE, CHELSEA	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1569/4629 Rpt: 1572/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRATTER, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code WILKESBARRE, PA 18705	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) BREWERY SALES REPRESENTATIVE		9 Employer (See Instructions) WALLENPAUPACK BREWING CO
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRATTER, ANTHONY <hr/> Contributor address; City; State; Zip Code WILKESBARRE, PA 18705	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) BREWERY SALES REPRESENTATIVE		Employer (See Instructions) WALLENPAUPACK BREWING CO
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAU, PEGGY <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92617	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAU, PEGGY <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SCPMG
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAU, PEGGY <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92617	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1570/4629 Rpt: 1573/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAU, PEGGY <hr/> 6 Contributor address; City; State; Zip Code IRVINE, CA 92617	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SCPMG
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAUDONS, ADRIENNE <hr/> Contributor address; City; State; Zip Code NAPLES, NY 14512	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1571/4629 Rpt: 1574/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GALVESTON, TX 77554		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77701		
Principal occupation / Job title (See Instructions) CHAPLAIN		Employer (See Instructions) BUCKNER HOSPICE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77701		
Principal occupation / Job title (See Instructions) CHAPLAIN		Employer (See Instructions) BUCKNER HOSPICE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77701		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, AVA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77701		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1572/4629 Rpt: 1575/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, DEAUN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, JOHN <hr/> Contributor address; City; State; Zip Code LAFAYETTE, CO 80026-1433	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, PATRICIA <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, SANDRA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, SANDRA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1573/4629 Rpt: 1576/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAVES, SANDRA <hr/> 6 Contributor address; City; State; Zip Code EL RENO, OK 73036	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) HOME HEALTH CEO		9 Employer (See Instructions) ALL THE LITTLE THINGS COUNT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, ANTHONY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76114	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT ENGINEER		Employer (See Instructions) OMNICELL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, ANTHONY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76114	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT ENGINEER		Employer (See Instructions) OMNICELL
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, BILLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, BILLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1574/4629 Rpt: 1577/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, CAROL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77070	7 Amount of Contribution (\$) \$15.25
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231-1504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, GLEN <hr/> Contributor address; City; State; Zip Code PALISADE, CO 81526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, JAMES <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, JAMES <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1575/4629 Rpt: 1578/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, JAMES <hr/> 6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, JONATHAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BRIAN CHARLES LLC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, KAITLYN <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27613	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) PROGRAM ASSISTANT		Employer (See Instructions) EMILY K CENTER
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, LADORIA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, LINDA <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) BLINN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1576/4629 Rpt: 1579/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, LORI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77002	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) HARRIS COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, MELINDA <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90402	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, MELINDA <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90402	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, MIKHAIL <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, MIKHAIL <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1577/4629 Rpt: 1580/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, SUSAN <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, SUSAN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, SUSAN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY, SUSAN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYDON, ROBERT D. <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) BRAVOZULUSERVICESPLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1578/4629 Rpt: 1581/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYLING, ROWAN <hr/> 6 Contributor address; City; State; Zip Code LOVELAND, OH 45140	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) P&G
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYSON, JOHN ROGER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE DEV		Employer (See Instructions) NXP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYSON, KATARINA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYSON, LAURA DIANN <hr/> Contributor address; City; State; Zip Code IDALOU, TX 79329	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAYSON, MELINDA C <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1579/4629 Rpt: 1582/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAZIANO, DANIEL <hr/> 6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02141	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RESEARCHER		9 Employer (See Instructions) NOVARTIS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAZIER, JACKIE <hr/> Contributor address; City; State; Zip Code FRESNO, CA 93727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) SUN-MAID
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREATHOUSE, SUMMER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BRACEWELL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREBANIER, ALICE <hr/> Contributor address; City; State; Zip Code BRANCHBURG, NJ 08865	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREBANIER, ALICE <hr/> Contributor address; City; State; Zip Code BRANCHBURG, NJ 08865	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1580/4629 Rpt: 1583/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREBANIER, ALICE <hr/> 6 Contributor address; City; State; Zip Code BRANCHBURG, NJ 08865	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREBANIER, MARIAN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97211	Amount of Contribution (\$) \$50.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREBANIER, MARIAN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97211	Amount of Contribution (\$) \$50.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRECO, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77066	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE SYSTEM
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRECO, SHELLY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075-1783	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GRECO LEGAL SERVICES, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1581/4629 Rpt: 1584/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRECO, SHELLY <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENLEE JR., RALPH <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624-3938	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, CAROLYN <hr/> Contributor address; City; State; Zip Code SOMERSET COUNTY, NJ 08873	Amount of Contribution (\$) \$10.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, CHRIS <hr/> Contributor address; City; State; Zip Code GAINESVILLE, VA 20155	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) NOBLIS-ESI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, GEOFFREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SBM OFFSHORE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1582/4629 Rpt: 1585/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, GEOFFREY	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77082		
8 Principal occupation / Job title (See Instructions) DESIGNER		9 Employer (See Instructions) SBM OFFSHORE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, GEOFFREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SBM OFFSHORE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, GEOFFREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SBM OFFSHORE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, GEOFFREY	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SBM OFFSHORE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, GEOFFREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SBM OFFSHORE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1583/4629 Rpt: 1586/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, JANIS <hr/> 6 Contributor address; City; State; Zip Code PALESTINE, TX 75801-7805	7 Amount of Contribution (\$) \$145.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, JUDITH <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$10.12
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, MARGO <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, SANDRA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, SARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1584/4629 Rpt: 1587/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, SARAH	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code RAYVILLE, LA 71269		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, STACEY	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, TINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) REALTOR ASSOCIATE		Employer (See Instructions) TINA GREEN INC
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) CALIBRATION TECHNICIAN		Employer (See Instructions) TESCOM
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) CALIBRATION TECHNICIAN		Employer (See Instructions) TESCOM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1585/4629 Rpt: 1588/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENBERG, LISE <hr/> 6 Contributor address; City; State; Zip Code BEL AIR, MD 21014	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78725	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78725	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1586/4629 Rpt: 1589/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, GRETCHEN <hr/> 6 Contributor address; City; State; Zip Code GILROY, CA 95020	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, GRETCHEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, MARK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, MARK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, MARK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1587/4629 Rpt: 1590/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, MINNA <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60640	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, RICHARD <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33473	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, RICHARD <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33473	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, RICHARD <hr/> Contributor address; City; State; Zip Code NEWTON, MA 02458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, ZINA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1588/4629 Rpt: 1591/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE, ZINA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENE SCOTT, MARQUETTE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code IOWA COLONY, TX 77583		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENFIELD, STEPHEN	Amount of Contribution (\$) \$500.24
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55408		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENFIELD, STUART	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) LECTURER		Employer (See Instructions) ACC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENFIELD, STUART	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) LECTURER		Employer (See Instructions) ACC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1589/4629 Rpt: 1592/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENGLASS, ANNE <hr/> 6 Contributor address; City; State; Zip Code NEWARK, DE 19711	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENLEY, RACHEL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98116	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) UW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENSPUN, VIRGINIA <hr/> Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91423	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWALD, JONATHAN <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) EMS EDUCATOR		Employer (See Instructions) AMR BOULDER OPERATIONS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREENWELL, MARGARET <hr/> Contributor address; City; State; Zip Code CLARKSVILLE, MO 63336	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) FURNITURE MAKER		Employer (See Instructions) MARGARET GREENWELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1590/4629 Rpt: 1593/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREER, AMY <hr/> 6 Contributor address; City; State; Zip Code BRADY, TX 76825	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) CATTLE RANCHER		9 Employer (See Instructions) SELF EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREER, ANDREA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FUNDRAISING CONSULTANT		Employer (See Instructions) ANDREA GREER CONSULTING
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREER, HALEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TRUST DIRECTOR		Employer (See Instructions) THE ARC OF TEXAS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREER, JANICE <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGERSEN, SHERRILYN <hr/> Contributor address; City; State; Zip Code WHITEWATER, CO 81527-9442	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1591/4629 Rpt: 1594/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGG, KEN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGG, KERRY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77003		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) LAN, INC.COM
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGG, KERRY	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77003		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) LAN, INC.COM
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98115		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98115		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1592/4629 Rpt: 1595/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98115-3636	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98115-3636	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98115-3636	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98115-3636	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BARBARA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98115-3636	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1593/4629 Rpt: 1596/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, BOB <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78747	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) TEXAS DISPOSAL SYSTEMS, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, FREDERICK <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAMES <hr/> Contributor address; City; State; Zip Code DUBLIN, OK 43016	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAMES <hr/> Contributor address; City; State; Zip Code DUBLIN, OK 43016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAMES <hr/> Contributor address; City; State; Zip Code DUBLIN, OK 43016	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1594/4629 Rpt: 1597/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAMES	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DUBLIN, OK 43016		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) GDT
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAMES	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DUBLIN, OK 43016		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DUBLIN, OK 43016		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WHITNEY, TX 76692		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JAY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WHITNEY, TX 76692		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1595/4629 Rpt: 1598/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JIM <hr/> 6 Contributor address; City; State; Zip Code DUBLIN, OH 43016	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) GDT
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JIM <hr/> Contributor address; City; State; Zip Code DUBLIN, OH 43016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, JIM <hr/> Contributor address; City; State; Zip Code DUBLIN, OH 43016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) GDT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, PAUL <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33193	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, PAUL <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33193	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1596/4629 Rpt: 1599/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, PAUL	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code MIAMI, FL 33193		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, PAUL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MIAMI, FL 33193		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, PAUL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MIAMI, FL 33193		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRELA, BARBRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EASTON, MD 21601		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREMILLION, MARYANN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1597/4629 Rpt: 1600/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREN, CONRAD <hr/> 6 Contributor address; City; State; Zip Code DAMASCUS, OR 97088	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) REFERENCE CHECKER		9 Employer (See Instructions) OREGON CONFERENCE OF SDA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREN, CONRAD <hr/> Contributor address; City; State; Zip Code DAMASCUS, OR 97088	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REFERENCE CHECKER		Employer (See Instructions) OREGON CONFERENCE OF SDA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRESHAM GOMEZ, TINA <hr/> Contributor address; City; State; Zip Code NORWOOD, NJ 07648	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) REGISTRAR		Employer (See Instructions) TENAFly BOARD OF EDUCATION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREWAL, RANDEEP <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ENGINEERING MANAGER		Employer (See Instructions) EMERSON
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIBBIN BURKET, RYAN <hr/> Contributor address; City; State; Zip Code MASTIC, NY 11950	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WILSON SONSINI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1598/4629 Rpt: 1601/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIBBIN BURKET, RYAN <hr/> 6 Contributor address; City; State; Zip Code MASTIC, NY 11950	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) WILSON SONSINI
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIDLEY, SUSAN <hr/> Contributor address; City; State; Zip Code RISING FAWN, GA 30738-5124	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, ADELE <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, ADELE <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, ADELE <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1599/4629 Rpt: 1602/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, DENISE <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77382	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT		9 Employer (See Instructions) SAFE AND CIVIL SCHOOLS
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, DENISE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT		Employer (See Instructions) SAFE AND CIVIL SCHOOLS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, JORDAN <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE MANAGER		Employer (See Instructions) VEXUS FIBER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, KEITH <hr/> Contributor address; City; State; Zip Code GARNERVILLE, NY 10923	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROJECT LEADER		Employer (See Instructions) MONDELEZ INTERNATIONAL INC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, PATRICIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) BROOKE HULL INS. AGENCY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1600/4629 Rpt: 1603/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) INSURANCE AGENT		9 Employer (See Instructions) BROOKE HULL INSURANCE AGENCY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, TERESA <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, TIMOTHY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, TIMOTHY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, WANDA FAYE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1601/4629 Rpt: 1604/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIS, LINDA <hr/> 6 Contributor address; City; State; Zip Code MIDDLEBURG, FL 32068-4631	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, IDONA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, IDONA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, IDONA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITH, MARK <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GRIFFITH & ASSOCIATES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1602/4629 Rpt: 1605/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITHS, MARILYN <hr/> 6 Contributor address; City; State; Zip Code SAN JOSE, CA 95121	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFITHS, THERESE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFIFN, HUNTER <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76014	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) DASHER		Employer (See Instructions) DOOR DASH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGGS, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF WENDEL WITHROW
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGGS, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF WENDEL WITHROW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1603/4629 Rpt: 1606/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGGS, DAVID <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75234	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICE OF WENDEL WITHROW
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGGS, EDNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGGS, SANDRA <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KISD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGSBY, EDNA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGSBY, JIM <hr/> Contributor address; City; State; Zip Code WARD, CO 80481-9529	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NEUROSCIENTIST		Employer (See Instructions) UNIVERSITY OF COLORADO DENVER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1604/4629 Rpt: 1607/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIGSBY, JIM <hr/> 6 Contributor address; City; State; Zip Code WARD, CO 80481-9529	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NEUROSCIENTIST		9 Employer (See Instructions) UNIVERSITY OF COLORADO DENVER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIM, JOHN <hr/> Contributor address; City; State; Zip Code WOODBIDGE, CT 06525	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIMALDO, ILDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIMES, DIANE <hr/> Contributor address; City; State; Zip Code SYRACUSE, NY 13210	Amount of Contribution (\$) \$524.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SYRACUSE UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIMES, MARIALICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1605/4629 Rpt: 1608/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIMES, NANCY <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37220	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIMM, ERIC <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ERIC C GRIMM, PLLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRINDELAND, MARY <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94089	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RIS/PACS ANDMINISTRATOT		Employer (See Instructions) PALO ALTO MEDICAL FOUNDATION
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRINTER, ALISON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75236	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRINTER, ALISON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75236	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1606/4629 Rpt: 1609/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRISSETTE, DENI	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code BURLESON, TX 76028		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRISSOM, MELISSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRISSOM, MELISSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRISSOM, MELISSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIZZARD, JOE	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code BOYD, TX 76023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1607/4629 Rpt: 1610/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIZZARD, JOE <hr/> 6 Contributor address; City; State; Zip Code BOYD, TX 76023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIZZARD, JOE <hr/> Contributor address; City; State; Zip Code BOYD, TX 76023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROFF, SARA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PERSONAL TRAINER		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROFF, SARA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PERSONAL TRAINER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROOBIN, KATHRYN <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90406	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TUTOR/SINGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1608/4629 Rpt: 1611/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROOBIN, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code SANTA MONICA, CA 90406	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TUTOR/SINGER		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROOBIN, KATHRYN <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90406	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TUTOR/SINGER		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSH, MARGARET <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSHARDT, JOANNE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSHARDT, JOANNE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1609/4629 Rpt: 1612/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSHARDT, JOANNE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSHARDT, JOANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, AMY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEW YORK, NY 10011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, GARY	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, GARY	Amount of Contribution (\$) \$124.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1610/4629 Rpt: 1613/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, GARY <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, NANCY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, NANCY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, PAULA <hr/> Contributor address; City; State; Zip Code RICHMOND, CA 94804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSS, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CHILDREN'S EYE SPECIALISTS, PA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1611/4629 Rpt: 1614/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSSKOPF, MARY KAY <hr/> 6 Contributor address; City; State; Zip Code WAUSAU, WI 54401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RN BSN OCN		9 Employer (See Instructions) MARSHFIELD CLINIC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROSSMAN, JANE <hr/> Contributor address; City; State; Zip Code RENO, NV 89511	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROUP, CROSS OAK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LOBBY FIRM		Employer (See Instructions) CROSS OAK GROUP
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROUP, GRAYDON STRAMA LUCIO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) GRAYDON STRAMA LUCIO GROUP
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROVES, GAIL <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1612/4629 Rpt: 1615/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, DANA <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, DANA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, DANA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1613/4629 Rpt: 1616/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		9 Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1614/4629 Rpt: 1617/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, GREG <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED NONPROFIT AND ENERGY PROFESSIONAL.		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBB, TAMI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUBER, GRADY M <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GREENBERG TRAUIG
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUENLOH, KATHY <hr/> Contributor address; City; State; Zip Code DECATUR, IL 62521	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1615/4629 Rpt: 1618/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUENLOH, KATHY <hr/> 6 Contributor address; City; State; Zip Code DECATUR, IL 62521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUNDY, JANICE <hr/> Contributor address; City; State; Zip Code WILLIAMSTON, MI 48895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SPARROW HOSPITAL
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUNDY, JANICE <hr/> Contributor address; City; State; Zip Code WILLIAMSTON, MI 48895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SPARROW HOSPITAL
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUNDY, JANICE <hr/> Contributor address; City; State; Zip Code WILLIAMSTON, MI 48895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SPARROW HOSPITAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUNWALD, ELIZABETH <hr/> Contributor address; City; State; Zip Code LOS FRESNOS, TX 78566	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WILDLIFE RESEARCHER		Employer (See Instructions) TEXAS A&M - KINGSVILLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1616/4629 Rpt: 1619/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUNWALD, GEORGE <hr/> 6 Contributor address; City; State; Zip Code BENICIA, CA 94510	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUSKOS, ALEXANDRA <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15208	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUSKOS, ALEXANDRA <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUSKOS, ALEXANDRA <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15208	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRUVMAN, EDNA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1617/4629 Rpt: 1620/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRYGLAS, PAUL <hr/> 6 Contributor address; City; State; Zip Code DELRAY BEACH, FL 33445	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) BLOOMINGDALE'S
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRYNWALD, CORTLAND <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS DEVELOPER		Employer (See Instructions) COUNSEL ON CALL, LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GU, HELEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726-1357	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SOLERA HOLDING INC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GU, TIANPENG <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUAJARDO, LUIS <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) URBAN PLANNER		Employer (See Instructions) ASAKURA ROBINSON COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1618/4629 Rpt: 1621/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUAJARDO, MARCO	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79912		
8 Principal occupation / Job title (See Instructions) DIGITAL ORGANIZER		9 Employer (See Instructions) TEXAS AFT
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUAJARDO, MARCO	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) DIGITAL ORGANIZER		Employer (See Instructions) TEXAS AFT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUCK, STEPHANIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LONGVIEW, TX 75605		
Principal occupation / Job title (See Instructions) CODA ASSOCIATE		Employer (See Instructions) CAPITAL ONE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUENTHER, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HARLINGEN, TX 78552		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUENTHER, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HARLINGEN, TX 78552		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1619/4629 Rpt: 1622/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUENTHER, NANCY FLY <hr/> 6 Contributor address; City; State; Zip Code HARLINGEN, TX 78552	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERBER, JAMES <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98117	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) GOOGLE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERDRUM, KURT <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERDRUM, KURT <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERDRUM, KURT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1620/4629 Rpt: 1623/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERDRUM, KURT	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) RETIRED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERDRUM, KURT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRA, JERRY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRA, JERRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRA, REYNALDO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) CHIEF		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1621/4629 Rpt: 1624/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRA, REYNALDO	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77009		
8 Principal occupation / Job title (See Instructions) CHIEF		9 Employer (See Instructions) HARRIS COUNTY
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRA, REYNALDO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) CHIEF		Employer (See Instructions) HARRIS COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, EMILY	Amount of Contribution (\$) \$47.00
Contributor address; City; State; Zip Code AUSTIN, TX 78750		
Principal occupation / Job title (See Instructions) DIRECTOR OF CHILDREN'S MINISTRIES		Employer (See Instructions) UNITED CHRISTIAN CHURCH OF AUSTIN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO, FRANCES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLEASANTON, TX 78064		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO SAENZ, STEPHANIE & RENE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415		
Principal occupation / Job title (See Instructions) TEACHERS		Employer (See Instructions) CORPUS CHRISTI ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1622/4629 Rpt: 1625/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRERO SAENZ, STEPHANIE & RENE <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHERS		9 Employer (See Instructions) CORPUS CHRISTI ISD
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRIER, BENITO <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) KIRKSEY ARCHITECT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUERRY, DEBBIE <hr/> Contributor address; City; State; Zip Code MOUNT PLEASANT, SC 29464	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) HUSBAND
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUEVARA, ASHLEY <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUFFEY, JAN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1623/4629 Rpt: 1626/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUICE, SUSAN <hr/> 6 Contributor address; City; State; Zip Code BILOXI, MS 39530	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDEN, ZARA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EVV SPECIALIST		Employer (See Instructions) ADDUS
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUILD-STITT, SHARON <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUILD-STITT, SHARON <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUILD-STITT, SHARON <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1624/4629 Rpt: 1627/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUINASSO, NORMAN <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUINASSO, NORMAN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIRGIS, DAVID <hr/> Contributor address; City; State; Zip Code JERSEY CITY, NJ 07306	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SENIOR COMMUNICATIONS ADVISOR		Employer (See Instructions) OFFICE OF COUNCILMEMBER JAMES SOLOMON (WARD)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTH, THOMAS <hr/> Contributor address; City; State; Zip Code TROY, MI 48098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULICK, ANN & DAVID <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63146	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1625/4629 Rpt: 1628/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULICK, ANN & DAVID <hr/> 6 Contributor address; City; State; Zip Code ST LOUIS, MO 63146	7 Amount of Contribution (\$) \$10.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULICK, STEPHEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) COMM. COLL. OF PHILA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULICK, STEPHEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19130	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) COMM. COLL. OF PHILA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULICK, STEPHEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) COMM. COLL. OF PHILA
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULICK, STEPHEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) COMM. COLL. OF PHILA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1626/4629 Rpt: 1629/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULIN, JAMIE <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20024	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FEDERAL		9 Employer (See Instructions) FEDERAL
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULIN, JAMIE <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FEDERAL		Employer (See Instructions) FEDERAL
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULIN, JAMIE <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FEDERAL		Employer (See Instructions) FEDERAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLEY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLEY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1627/4629 Rpt: 1630/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1628/4629 Rpt: 1631/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1629/4629 Rpt: 1632/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GULLICKSON, DOUGLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUND, AGNES <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10021	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNN, SUSAN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNN, SUSAN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1630/4629 Rpt: 1633/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNTER, JAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		9 Employer (See Instructions) KELLER WILLIAMS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNTER, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) KELLER WILLIAMS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUPTA, URMILA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURMAN, INA <hr/> Contributor address; City; State; Zip Code FARMINGDALE, NJ 07727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GURULE, COLLEEN <hr/> Contributor address; City; State; Zip Code MENIFEE, CA 92584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1631/4629 Rpt: 1634/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUSDORF, NIGEL <hr/> 6 Contributor address; City; State; Zip Code LOCKHART, TX 78644	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUSTER, CHARLES <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) WORTHINGTON INDUSTRIES
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTHRIE, AMANDA <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR OF LEARNING AND DEVELOPMENT		Employer (See Instructions) MOXIE PEST CONTROL
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTHRIE, CATHERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023-5118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, ABEL <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1632/4629 Rpt: 1635/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, ABEL <hr/> 6 Contributor address; City; State; Zip Code ANGLETON, TX 77515	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, FELIPE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) AT&T		Employer (See Instructions) CWA, STONEWALL, AT&T
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, FELIPE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) AT&T		Employer (See Instructions) CWA, STONEWALL, AT&T
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, GLORIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, GLORIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1633/4629 Rpt: 1636/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, JUAN (DAVID)	7 Amount of Contribution (\$) \$16.00
	6 Contributor address; City; State; Zip Code IRVING, TX 75061	
8 Principal occupation / Job title (See Instructions) DAVID GUTIERREZ		9 Employer (See Instructions) DAVID GUTIERREZ
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, MARIA	Amount of Contribution (\$) \$24.00
	Contributor address; City; State; Zip Code WEST COVINA, CA 91790	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, MICHAEL	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code EL PASO, TX 79936	
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) YISD
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, YAHARA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code EL PASO, TX 79912	
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, YAHARA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code EL PASO, TX 79912	
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1634/4629 Rpt: 1637/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, YAHARA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) TEXAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ-LEAL, SILVIA <hr/> Contributor address; City; State; Zip Code PALMHURST, TX 78573	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UTRGV
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTOW, RABBI STEVE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10040	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTTMAN, ALAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTTMAN, STEPHANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) RABBET

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1635/4629 Rpt: 1638/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTTMAN, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) RABBET
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUY, DONNA <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) ELEVATION ACCOUNTING & FINANCE LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUYTON, SAM <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80215	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUZMAN, LAUREN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) GAMESTOP INC.
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUZMAN, LAUREN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) GAMESTOP INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1636/4629 Rpt: 1639/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GYGI, ANN <hr/> 6 Contributor address; City; State; Zip Code ANACORTES, WA 98221	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H., CURRIE <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAAGENSON, KENNETH <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAAS, CAROLYN <hr/> Contributor address; City; State; Zip Code ROCKINGHAM, VT 05101	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) EDUCATION CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAAS, PAMELA <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) WELLS FARGO AUTO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1637/4629 Rpt: 1640/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HABER, KELLY <hr/> 6 Contributor address; City; State; Zip Code WAYNESBORO, VA 22980	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HABERMAN, PHYLLIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HABERN, CONNIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HABERN, CONNIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HACKLEMAN, ZETTA <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASMCA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1638/4629 Rpt: 1641/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HACKWORTH, GINA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76705	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDAD, GITA <hr/> Contributor address; City; State; Zip Code WALTHAM, MA 02451	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDAD, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDAD-MULLEN, CORINNE <hr/> Contributor address; City; State; Zip Code WATERTOWN, CT 06795	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DISTRICT SALES MANAGER		Employer (See Instructions) CLEAN HARBORS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDAD-MULLEN, CORINNE <hr/> Contributor address; City; State; Zip Code WATERTOWN, CT 06795	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DISTRICT SALES MANAGER		Employer (See Instructions) CLEAN HARBORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1639/4629 Rpt: 1642/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDAD-MULLEN, CORINNE <hr/> 6 Contributor address; City; State; Zip Code WATERTOWN, CT 06795	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) DISTRICT SALES MANAGER		9 Employer (See Instructions) CLEAN HARBORS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDAD-MULLEN, CORINNE <hr/> Contributor address; City; State; Zip Code WATERTOWN, CT 06795	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DISTRICT SALES MANAGER		Employer (See Instructions) CLEAN HARBORS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDEN, SCOTT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FILM PRODUCER		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDEN, SCOTT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDEN, SCOTT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FILM PRODUCER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1640/4629 Rpt: 1643/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADDEN, SCOTT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75238	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADEN, LORRI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADLEY, AURELIA <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, WA 98274	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADLEY, JANE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADNOT, DYNETRO <hr/> Contributor address; City; State; Zip Code JASPER, TX 75951	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TECHNOLOGY DIRECTOR		Employer (See Instructions) JASPER ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1641/4629 Rpt: 1644/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADSALL, MARVIN <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TAX MANAGER		9 Employer (See Instructions) MCLANE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HADSALL, TAYLOR <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) PERATON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAEFLING, CARL <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAFER, DAVID <hr/> Contributor address; City; State; Zip Code BENBROOK, TX 76126	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) US DOT/FAA
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAFERTEPE, KENNETH <hr/> Contributor address; City; State; Zip Code WACO, TX 76707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) BAYLOR UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1642/4629 Rpt: 1645/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAFERTEPE, KENNETH <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76707	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		9 Employer (See Instructions) BAYLOR UNIVERSITY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAFIZI, NILOUFAR <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONPROFIT EMPLOYEE		Employer (See Instructions) EMGAGE FOUNDATION
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAFIZI, NILOUFAR <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NONPROFIT		Employer (See Instructions) EMGAGE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAFIZI, NILOUFAR <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NONPROFIT		Employer (See Instructions) EMGAGE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGAN, KATE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ANESTHESIOLOGIST		Employer (See Instructions) MD ANDERSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1643/4629 Rpt: 1646/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGAN, KATE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ANESTHESIOLOGIST		9 Employer (See Instructions) MD ANDERSON
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGEMEIER, COOKIE <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGEN, KARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGHIGHATIAN, YVONNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAGMANN, JULI <hr/> Contributor address; City; State; Zip Code ALTOONA, WI 54720	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1644/4629 Rpt: 1647/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAHNE, DARREN <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) JAN HAHNE BOOKKEEPING TAX SERVICE INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIGHT GANSON, DONNA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAILEY, BROOKE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) SAP
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAILEY, CHARLES <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546-4006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAILEY, SHARYN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30310	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1645/4629 Rpt: 1648/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIMSON, LEONIE <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10011	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADVOCATE		9 Employer (See Instructions) CLASS SIZE MATTERS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAINES, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DESIGN + SALES		Employer (See Instructions) SIGNATURE SIGNS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIRSTON, MARC <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) UNIVERSITY OF TEXAS AT DALLAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIRSTON, MARC <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) UNIVERSITY OF TEXAS AT DALLAS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAISFIELD, MISTY <hr/> Contributor address; City; State; Zip Code THORNTON, CO 80241	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) MEDTRONIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1646/4629 Rpt: 1649/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAISFIELD, MISTY <hr/> 6 Contributor address; City; State; Zip Code THORNTON, CO 80241	7 Amount of Contribution (\$) \$3.57
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) MEDTRONIC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAITHCOCK, CARLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-5102	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) NELSONNYGAARD
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAJOVSKY, DAPHNE <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAJOVSKY, DAPHNE <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAJOVSKY, DAPHNE <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1647/4629 Rpt: 1650/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALAMICEK, PEGGY <hr/> 6 Contributor address; City; State; Zip Code SCHULENBURG, TX 78956	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALAMICEK, PEGGY <hr/> Contributor address; City; State; Zip Code SCHULENBURG, TX 78956	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALASZ, FRANKLIN <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALASZ, FRANKLIN <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALE, ABIGAIL <hr/> Contributor address; City; State; Zip Code BARTON, VT 05822	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1648/4629 Rpt: 1651/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALE, ANGELA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-2262	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF EMPLOYEED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALE, CAROL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALE, DEVORAH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) COLLECTIONS ASSISTANT		Employer (See Instructions) PEROT MUSEUM OF NATURE AND SCIENCE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEEM, SHAH <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEEM, SHAH <hr/> Contributor address; City; State; Zip Code KATY, TX 77494-2502	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SMZJ HOLDINGS LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1649/4629 Rpt: 1652/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEEM, SHAH	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code KATY, TX 77494		
8 Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		9 Employer (See Instructions) SMZJ HOLDING LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEEM, SHAH	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KATY, TX 77494		
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) SMZJ HOLDING LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALES, CALLA	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code CHARLOTTE, NC 28278		
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) A PREFERRED WOMEN'S HEALTH CENTER
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEY, ANTHONY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HMWK, LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEY, ANTHONY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HMWK, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1650/4629 Rpt: 1653/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEY, BENJAMIN <hr/> 6 Contributor address; City; State; Zip Code SOUTH HADLEY, MA 01075	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PLANNER		9 Employer (See Instructions) COMMONWEALTH OF MASSACHUSETTS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEY, JENNIFER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEY, JOY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALEY, NATHAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229-2533	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PRIVATE COMPANY
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALKO, GABRIELLE <hr/> Contributor address; City; State; Zip Code WEST CHESTER, PA 19380-5977	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WEST CHESTER UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1651/4629 Rpt: 1654/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALKO, GABRIELLE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code WEST CHESTER, PA 19380-5977		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) WEST CHESTER UNIVERSITY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, ASHLYNN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) POLICY ADVISOR		Employer (See Instructions) CARBON180
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, BRUCE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BREMERTON, WA 98337		
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) OLYMPIC COLLEGE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, CAMILLE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code GALVESTON, TX 77551		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, CAMILLE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code GALVESTON, TX 77551		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1652/4629 Rpt: 1655/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, DR. MIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
8 Principal occupation / Job title (See Instructions) PUBLIC EDUCATION EXECUTIVE		9 Employer (See Instructions) FORT WORTH ISD
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, DR. MIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) PUBLIC EDUCATION EXECUTIVE		Employer (See Instructions) FORT WORTH ISD
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, GEORGE	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code ISSAQUAH, WA 98029		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SELF
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, GEORGE	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code ISSAQUAH, WA 98029		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, GERALDINE	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code CLEVELAND, GA 30528		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1653/4629 Rpt: 1656/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, GRACE <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, JIMMY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676-5025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, JULI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1654/4629 Rpt: 1657/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LINDSEY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75086	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, MICHAL <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, MICHAL <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$103.95
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1655/4629 Rpt: 1658/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, MICHAL <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, NELLIE <hr/> Contributor address; City; State; Zip Code BOVINA CENTER, NY 13740	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, PAGE <hr/> Contributor address; City; State; Zip Code INGLESIDE, TX 78362	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NON PROFIT ORGANIZATION DIRECTOR		Employer (See Instructions) CASA OF THE COASTAL BEND
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, PAGE <hr/> Contributor address; City; State; Zip Code INGLESIDE, TX 78362	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NON PROFIT ORGANIZATION DIRECTOR		Employer (See Instructions) CASA OF THE COASTAL BEND
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, PAULA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1656/4629 Rpt: 1659/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, PAULA	7 Amount of Contribution (\$) \$55.00
6 Contributor address; City; State; Zip Code PLANO, TX 75086		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, ROBERT	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PETERSBURG, KY 41080		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, RON	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code DAYTON, OH 45420		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, ROSE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, STANLEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1657/4629 Rpt: 1660/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, STANLEY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, THERESE <hr/> Contributor address; City; State; Zip Code DISCOVERY BAY, CA 94505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ALAMEDA HEALTH SYSTEMS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, URSULA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1658/4629 Rpt: 1661/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL-GUMBLE, MARKITA <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL-GUMBLE, MARKITA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL-MCMURTRIE, MARCELLA <hr/> Contributor address; City; State; Zip Code EVERETT, WA 98203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL-MCMURTRIE, MARCELLA <hr/> Contributor address; City; State; Zip Code EVERETT, WA 98203	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WASTE MANAGEMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1659/4629 Rpt: 1662/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) WASTE MANAGEMENT
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019-6701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) WM
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WASTE MANAGEMENT
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WASTE MANAGEMENT
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WASTE MANAGEMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1660/4629 Rpt: 1663/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) WASTE MANAGEMENT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WASTE MANAGEMENT
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLENBECK, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019-6701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) WM
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLER, AUSTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702-3126	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLER, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1661/4629 Rpt: 1664/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLFORD, TOM <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76244	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLORAN, JOHN <hr/> Contributor address; City; State; Zip Code MASPETH, NY 11378-2626	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLOWELL, ELIZABETH <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALMOS, VICKI <hr/> Contributor address; City; State; Zip Code PALM BEACH, FL 33480	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPERIN, FRED <hr/> Contributor address; City; State; Zip Code CONROE, TX 77305	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1662/4629 Rpt: 1665/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPERIN, FRED <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77305	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPERIN, FRED <hr/> Contributor address; City; State; Zip Code CONROE, TX 77305	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPERN, BARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77082	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) HCC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPERN, BARRY AND SANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77082	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) HCC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPIN, RICHARD <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1663/4629 Rpt: 1666/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPIN, RICHARD <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALPIN-HEALY, TIMOTHY <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10027	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BARNARD COLLEGE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALSEY, TOY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALSEY, TOY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALTOM, SEAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) FEDERAL GOVERNMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1664/4629 Rpt: 1667/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALTOM, SEAN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76119	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) FEDERAL GOVERNMENT
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALVORSON, JENNIFER <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77506	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) OMG INC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMBLIN, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMBRECHT, CAROL <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64113	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMBY, DAVID <hr/> Contributor address; City; State; Zip Code SACHSE, TX 75048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SW ENGINEER		Employer (See Instructions) RAYTHEON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1665/4629 Rpt: 1668/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMBY, DAVID <hr/> 6 Contributor address; City; State; Zip Code SACHSE, TX 75048	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SW ENGINEER		9 Employer (See Instructions) RAYTHEON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMEL, DEBORAH <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMES, KAREN <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMES, KAREN <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMIK, JAMES <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CARPENTER		Employer (See Instructions) KAISER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1666/4629 Rpt: 1669/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76179	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1667/4629 Rpt: 1670/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76179	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILL, SAMUEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, CHRISTIAN <hr/> Contributor address; City; State; Zip Code FALMOUTH, KY 41040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) 84.51 LLC
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, CHRISTIAN <hr/> Contributor address; City; State; Zip Code FALMOUTH, KY 41040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) 84.51 LLC
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, CYNTHIA <hr/> Contributor address; City; State; Zip Code SPOKANE, WA 99223	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) COLDWELL BANKER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1668/4629 Rpt: 1671/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, JOHN <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA, CA 95403	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, JOSEPH <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37215	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, JOYCE <hr/> Contributor address; City; State; Zip Code TEXAS, TX 78552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, JOYCE <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, JOYCE <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1669/4629 Rpt: 1672/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, KAREN <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, KATHY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, LISA <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, SUMMER <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) HITACHI
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, SUMMER <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) HITACHI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1670/4629 Rpt: 1673/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, TIFFANY <hr/> 6 Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CASE MANAGER		9 Employer (See Instructions) ENDEAVORS
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON, TIFFANY <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CASE MANAGER		Employer (See Instructions) ENDEAVORS
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMILTON JR, JAMES <hr/> Contributor address; City; State; Zip Code ROSHARON, TX 77583	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) KBR
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMM, STEPHANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMM, STEPHANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1671/4629 Rpt: 1674/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMM, SUSAN	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMM, SUSAN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMM, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMAN, CELESTE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8243		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMAN, CELESTE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028-8243		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1672/4629 Rpt: 1675/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMERS, FRANCES	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code LOUISVILLE, KY 40206		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMODEH, MUSTAFA	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77084		
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) CSI ENGINEERING
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMOND, ANN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMOND, GEORGE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRIDGEPORT, PA 19405		
Principal occupation / Job title (See Instructions) FOOD DELIVERY		Employer (See Instructions) FWOT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMOND, GEORGE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BRIDGEPORT, PA 19405		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1673/4629 Rpt: 1676/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMOND, GEORGE <hr/> 6 Contributor address; City; State; Zip Code BRIDGEPORT, PA 19405	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMOND, NANCY <hr/> Contributor address; City; State; Zip Code OVERLAND PARK, KS 66213	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) KUMED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMONS, KATHERINE <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HR IMMIGRATION SPECIALIST		Employer (See Instructions) JOHNS HOPKINS UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMMONS, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMNER, HENRY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1674/4629 Rpt: 1677/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMNER, RICHARD <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, ALEXANDRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20001	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, ALEXANDRA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, BETHANY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, DAVID <hr/> Contributor address; City; State; Zip Code ATASCADERO, CA 93422	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) CA DEPT OF STATE HOSPITALS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1675/4629 Rpt: 1678/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, LINDA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMPTON, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMRICK, BEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76134	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMRIN, NEIL <hr/> Contributor address; City; State; Zip Code EDEN PRAIRIE, MN 55344	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMS, ANNEMARIE <hr/> Contributor address; City; State; Zip Code WOODSTOCK, IL 60098	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1676/4629 Rpt: 1679/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMS, ANNEMARIE <hr/> 6 Contributor address; City; State; Zip Code WOODSTOCK, IL 60098	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAN, JIM <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) KREST ENGINEERS LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANCK, CINDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANCOCK, ARTEMUS <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANCOCK, ARTEMUS <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1677/4629 Rpt: 1680/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANCOCK, DOUG <hr/> 6 Contributor address; City; State; Zip Code VIDOR, TX 77662-9733	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ELECTRICIAN		9 Employer (See Instructions) NEWTRON
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANCOCK, DOUG <hr/> Contributor address; City; State; Zip Code VIDOR, TX 77662-9733	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) NEWTRON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANCOCK, KEVIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAND, DORCAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AOS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAND, DORCAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AOS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1678/4629 Rpt: 1681/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAND BRYAN, CAROL <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) RRISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAND BRYAN, CAROL <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDELMAN, BARBARA <hr/> Contributor address; City; State; Zip Code NORWICH, VT 05055	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, AYSHA <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94592	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) UPRIGHT POSITION COMMUNICATIONS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, AYSHA <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94592	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) UPRIGHT POSITION COMMUNICATIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1679/4629 Rpt: 1682/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, AYSHA <hr/> 6 Contributor address; City; State; Zip Code VALLEJO, CA 94592	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PR		9 Employer (See Instructions) UPRIGHT POSITION COMMUNICATIONS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, DWAIN <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, DWAIN <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FITNESS TRAINER		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDLEY, DWAIN <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FITNESS TRAINER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1680/4629 Rpt: 1683/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDMAKER, NANCY <hr/> 6 Contributor address; City; State; Zip Code CORRALES, NM 87048	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANDY, DEXTER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LT COL, US AIR FORCE, RETIRED		Employer (See Instructions) DEPARTMENT OF DEFENSE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANES, JENNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) POLICY ADVISOR		Employer (See Instructions) CITY OF AUSTIN
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANES, JENNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) POLICY ADVISOR		Employer (See Instructions) CITY OF AUSTIN
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANES, JENNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1681/4629 Rpt: 1684/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANESWORTH, ISABELLA <hr/> 6 Contributor address; City; State; Zip Code BRONX, NY 10463	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) NO E
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANEY, WILIAM <hr/> Contributor address; City; State; Zip Code WAYLAND, MA 01778	Amount of Contribution (\$) \$1,136.38
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) DRAGONFLY
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANINK, PETER <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) CAL POLY POMONA
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANINK, PETER <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) CAL POLY POMONA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKE, ERIC <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FIELD REP		Employer (See Instructions) TCDRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1682/4629 Rpt: 1685/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKE, ERIC	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642		
8 Principal occupation / Job title (See Instructions) FIELD REP		9 Employer (See Instructions) TCDRS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKE, ERIC	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642		
Principal occupation / Job title (See Instructions) FIELD REP		Employer (See Instructions) TCDRS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKINSON, BARBARA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DADS TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1683/4629 Rpt: 1686/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1684/4629 Rpt: 1687/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANKS, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1685/4629 Rpt: 1688/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HANNA & PLAUT, LLP
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, JACK <hr/> Contributor address; City; State; Zip Code INDIANA, PA 15701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, JAMES <hr/> Contributor address; City; State; Zip Code OXNARD, CA 93035-3145	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, JAMES <hr/> Contributor address; City; State; Zip Code OXNARD, CA 93035-3145	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, KATINA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1686/4629 Rpt: 1689/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, KATINA <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	7 Amount of Contribution (\$) \$519.75
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, NORA <hr/> Contributor address; City; State; Zip Code SUGAR HILL, GA 30518	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, PATRICIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254-8311	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) JACOBS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, WHITNEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018-5312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) TNTP
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNA, WHITNEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018-5312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) TNTP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1687/4629 Rpt: 1690/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNAMAN, DAVID <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) TEXAS INSTRUMENTS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNEMANN, JOHN <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) TEXAS HHS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANNEMANN, JOHN <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) TEXAS HHS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANS, CAROL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, DINA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) BUYER		Employer (See Instructions) SOUTHWEST AIRLINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1688/4629 Rpt: 1691/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, DINA <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75040	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) BUYER		9 Employer (See Instructions) SOUTHWEST AIRLINES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, KALLI <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MUSIC THERAPIST		Employer (See Instructions) SCHOOL DISTRICT
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, MARILYN <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NATIONAL INSTRUMENTS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NATIONAL INSTRUMENTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1689/4629 Rpt: 1692/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) NATIONAL INSTRUMENTS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NATIONAL INSTRUMENTS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NATIONAL INSTRUMENTS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NATIONAL INSTRUMENTS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NATIONAL INSTRUMENTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1690/4629 Rpt: 1693/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PAUL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727-6870	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) NATIONAL INSTRUMENTS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, PETER <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, ROBERT <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, ROBERT <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSEN, SIERRA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CLEARERESULT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1691/4629 Rpt: 1694/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, ANTHONI <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) TRAVIS COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, THOMAS <hr/> Contributor address; City; State; Zip Code BYNUM, TX 76631	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, THOMAS <hr/> Contributor address; City; State; Zip Code BYNUM, TX 76631	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, THOMAS <hr/> Contributor address; City; State; Zip Code BYNUM, TX 76631	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANUS, TIM <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1692/4629 Rpt: 1695/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANVEY, PHYLLIS <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) SETON HEALTHCARE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANVEY, PHYLLIS <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SETON HEALTHCARE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANWAY, SUSAN <hr/> Contributor address; City; State; Zip Code BABCOCK RANCH, FL 33982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANWAY, SUSAN <hr/> Contributor address; City; State; Zip Code BABCOCK RANCH, FL 33982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANZ, PAUL L. <hr/> Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1693/4629 Rpt: 1696/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANZ, PAUL L. <hr/> 6 Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANZ, PAUL L. <hr/> Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANZ, PAUL L. <hr/> Contributor address; City; State; Zip Code MANTECA, CA 95336-5129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAQUE, WAQAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAQUE, WAQAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1694/4629 Rpt: 1697/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARALSON, HOWARD <hr/> 6 Contributor address; City; State; Zip Code LIPAN, TX 76462	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARAM, MICHELE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARAMIS, LINN <hr/> Contributor address; City; State; Zip Code PARK RIDGE, IL 60068	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARBECK, HOPE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARBECK, HOPE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1695/4629 Rpt: 1698/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARBERT, GLENDA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARBERT, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARBISON, PAUL <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARBISON, PAUL <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARCROW, MELISSA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79928	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) WOMEN VETERANS COORDINATOR		Employer (See Instructions) TEXAS VETERANS COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1696/4629 Rpt: 1699/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDAWAY, CHARLES <hr/> 6 Contributor address; City; State; Zip Code CHELTENHAM TOWNSHIP, PA 19012	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDBERGER, LINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDEMAN, DESIREE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) HARDEMAN FAMILY HOMES AND SERVICES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDENBURG, C <hr/> Contributor address; City; State; Zip Code PORTLAND, NY 14769	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDEY, THOMAS <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) STAGE MANAGER		Employer (See Instructions) FREELANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1697/4629 Rpt: 1700/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDIN, GINA <hr/> 6 Contributor address; City; State; Zip Code LYONS, CO 80540	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) UNEMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDIN, GLENNDA <hr/> Contributor address; City; State; Zip Code LIBERTY, TX 77575	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDIN, GLENNDA <hr/> Contributor address; City; State; Zip Code LIBERTY, TX 77575	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDIN, RUSTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RUSTY HARDIN & ASSOC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDING, CARLOTTA <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1698/4629 Rpt: 1701/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDING, MOLLY <hr/> 6 Contributor address; City; State; Zip Code NANTUCKET, MA 02554	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) NANTUCKET COTTAGE HOSPITAL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDINGTON, GLORIA <hr/> Contributor address; City; State; Zip Code ROCKY RIVER, OH 44116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) SELF EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDT, BRENDA <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDWICK, HERBERT <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64108	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARDWICK LAW FIRM, LLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDY, GAIL <hr/> Contributor address; City; State; Zip Code HERMITAGE, TN 37076	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1699/4629 Rpt: 1702/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDY, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code ADDISON, TX 75254	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDY, KEITH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDY-EASTER, SHARON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) AUDITOR		Employer (See Instructions) UNITED FIRE GROUP
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARE, STACIE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SHARE OUR STRENGTH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARHAI, DEBORAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1700/4629 Rpt: 1703/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	7 Amount of Contribution (\$) \$210.00
6 Contributor address; City; State; Zip Code CANDLER, NC 28715		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) HOSPITAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CANDLER, NC 28715		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CANDLER, NC 28715		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CANDLER, NC 28715		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	Amount of Contribution (\$) \$105.00
Contributor address; City; State; Zip Code CANDLER, NC 28715		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1701/4629 Rpt: 1704/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD <hr/> 6 Contributor address; City; State; Zip Code CANDLER, NC 28715	7 Amount of Contribution (\$) \$210.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) HOSPITAL
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD <hr/> Contributor address; City; State; Zip Code CANDLER, NC 28715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD <hr/> Contributor address; City; State; Zip Code CANDLER, NC 28715	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD <hr/> Contributor address; City; State; Zip Code CANDLER, NC 28715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD <hr/> Contributor address; City; State; Zip Code CANDLER, NC 28715	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1702/4629 Rpt: 1705/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	7 Amount of Contribution (\$) \$62.00
6 Contributor address; City; State; Zip Code CANDLER, NC 28715		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) HOSPITAL
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	Amount of Contribution (\$) \$62.00
Contributor address; City; State; Zip Code CANDLER, NC 28715		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARLAND, DONALD	Amount of Contribution (\$) \$62.00
Contributor address; City; State; Zip Code CANDLER, NC 28715		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HOSPITAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMAN, AUROS	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code SAN BRUNO, CA 94066-4505		
Principal occupation / Job title (See Instructions) SUPPORT ENGINEER		Employer (See Instructions) TESLA ENERGY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMAN, JUDITH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1703/4629 Rpt: 1706/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMAN, SHANNON <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) K12 STRIDE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMIER, JOSEPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIREMENT PLAN ADMINISTRATOR		Employer (See Instructions) NOVA 401(K) ASSOCIATES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMIER, JOSEPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIREMENT PLAN ADMINISTRATOR		Employer (See Instructions) NOVA 401(K) ASSOCIATES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMISON, DEAN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMISON, DEAN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1704/4629 Rpt: 1707/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMISON, DEAN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARMON, JEFF <hr/> Contributor address; City; State; Zip Code HOUSTON, AL 77002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) EOG RESOURCES
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARNDEN, RALPH <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85713-6419	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARP, JIM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) EBBY HALLIDAY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARP, JIM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) EBBY HALLIDAY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1705/4629 Rpt: 1708/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPER, ANDREW <hr/> 6 Contributor address; City; State; Zip Code SNOHOMISH, WA 98296	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) TEACHER!!		9 Employer (See Instructions) EVERETT PUBLIC SCHOOLS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPER, ANDREW <hr/> Contributor address; City; State; Zip Code SNOHOMISH, WA 98296	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) TEACHER!!		Employer (See Instructions) EVERETT PUBLIC SCHOOLS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPER, CHRIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPER, CHRIS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPER, LESLIE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-7810	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1706/4629 Rpt: 1709/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPER, VICKI <hr/> 6 Contributor address; City; State; Zip Code NORTHFIELD, MN 55057	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARPOLD, MARTHA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRAL, HARRIET <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) THE HARRAL GROUP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRELL, JACKSON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRELL, JACKSON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1707/4629 Rpt: 1710/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIGAN, SUE ELLEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIGAN, SUE ELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIGAN, SUE ELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGER, CARLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGER, CARLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1708/4629 Rpt: 1711/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, ANGELA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, ANGELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, ANGELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, CHRIS <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97225	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) OHSU
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, JANE <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1709/4629 Rpt: 1712/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, JOAN <hr/> 6 Contributor address; City; State; Zip Code AROMAS, CA 95004	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, JOAN <hr/> Contributor address; City; State; Zip Code AROMAS, CA 95004	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, JOSEPH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92102	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) FORESIGHT SPORTS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, JOSEPH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92102	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) FORESIGHT SPORTS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, KATIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) FOLEY & LARDNER LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1710/4629 Rpt: 1713/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, LAWRENCE R <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, LAWRENCE R <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, MARILYN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, MARILYN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, MARILYN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1711/4629 Rpt: 1714/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, MARILYN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78015	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, MIRIAM <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRINGTON, SYLVIA <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, ANDREA <hr/> Contributor address; City; State; Zip Code WHITE MARSH, VA 23183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, ANTOINETTE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CLAIM SPECIALIST		Employer (See Instructions) STATE FARM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1712/4629 Rpt: 1715/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, ANTOINETTE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) CLAIM SPECIALIST		9 Employer (See Instructions) STATE FARM
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CARROLL <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27603	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CARROLL <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27603	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CATHY <hr/> Contributor address; City; State; Zip Code TYLER, IA 75707	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1713/4629 Rpt: 1716/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CATHY <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75707	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CATHY <hr/> Contributor address; City; State; Zip Code TYLER, IA 75707	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CATHY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CLAUDIA <hr/> Contributor address; City; State; Zip Code ROSLINDALE, MA 02131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, CLAUDIA <hr/> Contributor address; City; State; Zip Code ROSLINDALE, MA 02131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1714/4629 Rpt: 1717/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code CLOVIS, CA 93611	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, ELIZABETH <hr/> Contributor address; City; State; Zip Code CLOVIS, CA 93611	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, GAYLE <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, GAYLE <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, GUY <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022-1649	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1715/4629 Rpt: 1718/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, GUY	7 Amount of Contribution (\$) \$62.50
6 Contributor address; City; State; Zip Code LOS ALTOS, CA 94022-1649		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, JENNIFER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MCKESSON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, JONATHAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, LARRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALBANY, GA 31708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, LISA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code TEMECULA, CA 92591		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1716/4629 Rpt: 1719/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MICHAEL	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77002		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) THE HARRIS LAW FIRM
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MICHAEL	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77002		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE HARRIS LAW FIRM
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MICHAEL	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77002		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE HARRIS LAW FIRM
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MIKE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MIKE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1717/4629 Rpt: 1720/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MIKE <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MIKE <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MIKE <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, MIKE <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, NANCY <hr/> Contributor address; City; State; Zip Code SENECA, SC 29672-2412	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TENNIS COACH		Employer (See Instructions) CLEMSON UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1718/4629 Rpt: 1721/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, NEAL <hr/> 6 Contributor address; City; State; Zip Code SCHERTZ, TX 78108	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DOD		9 Employer (See Instructions) DOD
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, NELDA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NELDA HARRIS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, NELDA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NELDA HARRIS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, NOLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, PAUL L. <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1719/4629 Rpt: 1722/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, PAUL L.	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, QUIN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, SANDRA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEW YORK, NY 10025		
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) FEDERAL RESERVE BANK
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, SANDRA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEW YORK, NY 10025		
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) FEDERAL RESERVE BANK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, SANDRA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW YORK, NY 10025		
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) FEDERAL RESERVE BANK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1720/4629 Rpt: 1723/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, SANDRA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10025	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RISK MANAGEMENT		9 Employer (See Instructions) FEDERAL RESERVE BANK
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, SANDRA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) FEDERAL RESERVE BANK
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, SANDRA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) FEDERAL RESERVE BANK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, TENNILLE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRIS, TERESA <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1721/4629 Rpt: 1724/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, AMY BETH <hr/> 6 Contributor address; City; State; Zip Code WINTHROP, MA 02152	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) EXCEL ACADEMY CHARTER SCHOOL
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, CHAREE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MEDIA CONSULTING		Employer (See Instructions) ETCHED COMMUNICATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, JODY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, JODY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, JODY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1722/4629 Rpt: 1725/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, JOHN <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, JOHN <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, LAUREN <hr/> Contributor address; City; State; Zip Code EMMETSBURG, IA 50536	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, LIZZA <hr/> Contributor address; City; State; Zip Code TIJERAS, NM 87059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, LIZZA <hr/> Contributor address; City; State; Zip Code TIJERAS, NM 87059	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1723/4629 Rpt: 1726/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, MARK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77074	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FINANCE		9 Employer (See Instructions) GROUP 1
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, MARK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) GROUP 1
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, MARK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) GROUP 1
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, NORMA J F <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94702	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) DOESPOT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1724/4629 Rpt: 1727/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, PAUL	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78748		
8 Principal occupation / Job title (See Instructions) PRODUCT MANAGER		9 Employer (See Instructions) DOESPOT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, RALPH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, REGINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, RONNIE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346		
Principal occupation / Job title (See Instructions) LAND SURVEYOR		Employer (See Instructions) LANDPOINT
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, RONNIE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346		
Principal occupation / Job title (See Instructions) LAND SURVEYOR		Employer (See Instructions) LANDPOINT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1725/4629 Rpt: 1728/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, TOM	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78748-3106		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARROP, DAVID	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ARLINGTON, VA 22201		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARSLEM, ERIC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, JULIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, JULIANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) PRODUCT MARKETING MANAGER		Employer (See Instructions) MICROSOFT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1726/4629 Rpt: 1729/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, JULIANNE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PRODUCT MARKETING MANAGER		9 Employer (See Instructions) MICROSOFT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, JULIANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, JULIANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, KATHLEEN <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34203	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, MARGARET <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1727/4629 Rpt: 1730/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, PAUL <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075-1525	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HART, PAUL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTGROVE, SUZY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC AFFAIRS		Employer (See Instructions) HREC
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTGROVES, TAMMIE <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTGROVES, TAMMIE <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1728/4629 Rpt: 1731/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTLEY, DIANE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75209		
8 Principal occupation / Job title (See Instructions) GM		9 Employer (See Instructions) MCKISSOCK
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTLEY, MARTHA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FREDERICK, MD 21702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTLEY, MARTHA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FREDERICK, MD 21702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTLEY, MARTHA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FREDERICK, MD 21702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, BERL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1729/4629 Rpt: 1732/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) IMPLEMENTATION MANAGER		9 Employer (See Instructions) YOURCAUSE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, DAN <hr/> Contributor address; City; State; Zip Code NASHVILLE, IN 47448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, DAN <hr/> Contributor address; City; State; Zip Code NASHVILLE, IN 47448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, DAN <hr/> Contributor address; City; State; Zip Code NASHVILLE, IN 47448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, DENNIS W. <hr/> Contributor address; City; State; Zip Code YORK HAVEN, PA 17370	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1730/4629 Rpt: 1733/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, ERIC	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703-3016		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703-3016		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703-3016		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1731/4629 Rpt: 1734/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, JOHN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HATFIELD, PA 19440-4105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTMAN, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HATFIELD, PA 19440-4105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTNELL-WILLIAMS, JANET	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTSOUGH, LUCAS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WATERTOWN, MA 02472		
Principal occupation / Job title (See Instructions) COMPUTATIONAL BIOLOGIST		Employer (See Instructions) GINKGO BIOWORKS, INC
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTSOUGH, LUCAS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WATERTOWN, MA 02472		
Principal occupation / Job title (See Instructions) COMPUTATIONAL BIOLOGIST		Employer (See Instructions) GINKGO BIOWORKS, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1732/4629 Rpt: 1735/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, ANGELA <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75033	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, DANIEL <hr/> Contributor address; City; State; Zip Code FOUNTAINVILLE, PA 18923	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, JONATHAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QUANTITATIVE ANALYST		Employer (See Instructions) FREDDIE MAC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, JONATHAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QUANTITATIVE ANALYST		Employer (See Instructions) FREDDIE MAC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, LYNDA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1733/4629 Rpt: 1736/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, LYNDA <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, LYNDA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, MARY JO <hr/> Contributor address; City; State; Zip Code SPOKANE, WA 99224-4436	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, NICK <hr/> Contributor address; City; State; Zip Code TOMALES, CA 94971-0108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, RICHARD <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) WORKFORCE LOGIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1734/4629 Rpt: 1737/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY, RICHARD <hr/> 6 Contributor address; City; State; Zip Code SAVOY, IL 61874	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY ANDERSON, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER/MEDIATOR		Employer (See Instructions) DIANE M HARVEY, LCSW
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARVEY ANDERSON, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER/MEDIATOR		Employer (See Instructions) DIANE M HARVEY, LCSW
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARWELL, AUDWIN <hr/> Contributor address; City; State; Zip Code SHELBY COUNTY, TN 38016	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASANALI, ALI <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SOHAIL "ALI" HASANALI, ATTORNEY AT LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1735/4629 Rpt: 1738/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASANALI, ALI <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SOHAIL "ALI" HASANALI, ATTORNEY AT LAW
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASBROUCK, ELLEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10001	Amount of Contribution (\$) \$10.12
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, DONNA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RETIRED--NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, DONNA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED--NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, DONNA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED--NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1736/4629 Rpt: 1739/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, DONNA <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED--NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASCHKE, GERALD <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASEMAN, BOB <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) HTOWN ENGINEERS LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASHMI, ZAINAB <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LW
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASKIN, DANNY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1737/4629 Rpt: 1740/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASKIN, DENNIS <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SWAGGER
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASLINGER, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UPPER AUSTRIAN DEPARTMENT OF EDUCATION
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSAN, JOSEPH <hr/> Contributor address; City; State; Zip Code READING, PA 19606	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSAN, MEAGAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSAN, MEAGAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1738/4629 Rpt: 1741/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSENFRTIZ, JAMES <hr/> 6 Contributor address; City; State; Zip Code MT PLEASANT, IA 52641	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSENFRTIZ, JAMES <hr/> Contributor address; City; State; Zip Code MT PLEASANT, IA 52641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSLACHER, ELISABETH <hr/> Contributor address; City; State; Zip Code BALA CYNWYD, PA 19004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASSLACHER, ELISABETH <hr/> Contributor address; City; State; Zip Code BALA CYNWYD, PA 19004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASTA, JUZAR <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1739/4629 Rpt: 1742/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASTERT, PAUL <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77382	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PILOT		9 Employer (See Instructions) UNITED AIRLINES
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASTERT, PAUL <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) UNITED AIRLINES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASTINGS, ELIZABETH <hr/> Contributor address; City; State; Zip Code OCALA, FL 34470	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASTY, SHERRY <hr/> Contributor address; City; State; Zip Code WATAUGA, TX 76148	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF SERVICES		Employer (See Instructions) SHERWOOD ENTERPRISES
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATCH, JOHN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEXAS PETITION STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1740/4629 Rpt: 1743/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATCH, JOHN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code BUDA, TX 78610		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) TEXAS PETITION STRATEGIES
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATCH, JOHN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEXAS PETITION STRATEGIES
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATCH, JOHN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEXAS PETITION STRATEGIES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATCHER-KAY, CARRIE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ANN ARBOR, MI 48103		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATFIELD, CARRIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RED OAK, TX 75154		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1741/4629 Rpt: 1744/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATFIELD, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77054	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATFIELD, JACQUELINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATHAWAY, SHAROL <hr/> Contributor address; City; State; Zip Code ROCKFIELD, KY 42274	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATHORN JR, BOOKER T <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63136	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATLA, VALARIE <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77807	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1742/4629 Rpt: 1745/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATLEN, LEIF	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77077		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATLEN, LEIF	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATTERY, KEVIN	Amount of Contribution (\$) \$33.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NON-PROFIT EXECUTIVE		Employer (See Instructions) BOYS & GIRLS CLUBS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATTIS, ANNA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code GILBERT, AZ 85296		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HATTIS, ANNA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code GILBERT, AZ 85296		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1743/4629 Rpt: 1746/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUBER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code STATEN ISLAND, NY 10309-2820	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUBOLD, MARY <hr/> Contributor address; City; State; Zip Code TOPEKA, KS 66614	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUPTMAN, ELIZABETH <hr/> Contributor address; City; State; Zip Code ENGLEWOOD, CO 80110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUSER, POLLY <hr/> Contributor address; City; State; Zip Code DUBUQUE, IA 52001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) DB&T
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUSER, POLLY <hr/> Contributor address; City; State; Zip Code DUBUQUE, IA 52001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) FINANCIAL ADVISOR		Employer (See Instructions) DB&T

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1744/4629 Rpt: 1747/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUSER, SARAH <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUSER, SARAH <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUSMANN, SE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAUSMANN, SE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAVARD, KRISTY <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) DEER PARK ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1745/4629 Rpt: 1748/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAVARD, KRISTY <hr/> 6 Contributor address; City; State; Zip Code LA PORTE, TX 77571	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) DEER PARK ISD
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAVERKAMP, RITA M <hr/> Contributor address; City; State; Zip Code EL CAJON, CA 92020	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAVERKAMP, RITA M <hr/> Contributor address; City; State; Zip Code EL CAJON, CA 92020	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWES, CATHERINE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWES, CATHERINE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1746/4629 Rpt: 1749/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWES, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWES, CATHERINE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) STATE REP		Employer (See Instructions) STATE OF TEXAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, BRENDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, HEATHER <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1747/4629 Rpt: 1750/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, JOE <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) HUSER CONSTRUCTION
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, JOE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) HUSER CONSTRUCTION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, SUSAN <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38117	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, SUSAN <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, SUSAN <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1748/4629 Rpt: 1751/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code MEMPHIS, TN 38117	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWRYLKO, R <hr/> Contributor address; City; State; Zip Code KAMUELA, HI 96743	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INDEPENENT CONTRACTOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INDEPENENT CONTRACTOR		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INDEPENENT CONTRACTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1749/4629 Rpt: 1752/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, DEBRA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) INDEPENENT CONTRACTOR		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INDEPENENT CONTRACTOR		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWTHORNE, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INDEPENENT CONTRACTOR		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAY, AMY <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UTRGV
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAY, STEPHANIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STEPHANIE HAY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1750/4629 Rpt: 1753/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYCRAFT, TOM <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PROFESSIONAL DRIVER		9 Employer (See Instructions) MAVERICK TRANSPORTATION
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYCRAFT, TOM <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSIONAL DRIVER		Employer (See Instructions) MAVERICK TRANSPORTATION
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYDUK, MARY LOU <hr/> Contributor address; City; State; Zip Code MACOMB, MI 48042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, HOLLY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROPOSAL MANAGER		Employer (See Instructions) EA ENGINEERING SCIENCE AND TECHNOLOGY INC PBC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, JAMES <hr/> Contributor address; City; State; Zip Code HOLBROOK, NY 11741	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1751/4629 Rpt: 1754/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code CUSTER CITY, OK 73639	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) CLINTON PS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, MARY ANN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013-4881	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, MARY ANN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013-4881	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES WALKER, MARSHA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES WALKER, MARSHA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1752/4629 Rpt: 1755/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYGOOD, KEVIN <hr/> 6 Contributor address; City; State; Zip Code LAKE FOREST, CA 92630	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYMAN, JUDY <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYMES, CHERRY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYMON, AVA <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70808	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, CAROLE <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATA ENGINEER		Employer (See Instructions) DELL TECHNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1753/4629 Rpt: 1756/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, CAROLE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LOCKHART, TX 78644		
8 Principal occupation / Job title (See Instructions) DATA ENGINEER		9 Employer (See Instructions) DELL TECHNOLOGIES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, DAVID	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WRIGHTSVILLE, PA 17368		
Principal occupation / Job title (See Instructions) CHEF TEACHER		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, GEMAYEL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77020		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, JANET	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, JANET	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1754/4629 Rpt: 1757/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, JANET <hr/> 6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, LATHE <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15206	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, SALLY <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR MANAGER		Employer (See Instructions) CREST PUMPING TECHNOLOGIES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, MARK <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) MUSIC TEACHET
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, MARK <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) MUSIC TEACHET

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1755/4629 Rpt: 1758/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, MARK <hr/> 6 Contributor address; City; State; Zip Code WOODWAY, TX 76712	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) MUSIC TEACHET
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYS, MARK <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) MUSIC TEACHET
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYWARD, DIANE <hr/> Contributor address; City; State; Zip Code HOPKINTON, MA 01748	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONTRACT ADMINISTRATOR		Employer (See Instructions) F.W. MADIGAN COMPANY, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYWARD, LORI <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) ATTORNEY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAZEL, BRENDA <hr/> Contributor address; City; State; Zip Code BOYDS, MD 20841	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1756/4629 Rpt: 1759/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HDEWORKMAN, MARIA. <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76902	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HE, JIANG <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TECH CONSULTANT		Employer (See Instructions) EY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEACOCK, ANNE <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEALD, FREDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEALD, FREDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TEMPLE EMANU-EL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1757/4629 Rpt: 1760/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEALD, FRED A <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEALY, JOHN <hr/> Contributor address; City; State; Zip Code BILTMORE LAKE, NC 28715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1758/4629 Rpt: 1761/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEARD, ELIZABETH E <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748-3032	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEATH, ERNEST <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60654	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) DATAVANT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1759/4629 Rpt: 1762/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEATH, MARTY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PLANO, TX 75075		
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) HEALTHSMART
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEATH, SONYA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77001		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE LAW OFFICE OF SONYA HEATH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBBLEWHITE, MARY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SANDY SPRINGS, GA 30328		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DR. MARY HRBBLEWHITE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBBLEWHITE, MARY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SANDY SPRINGS, GA 30328		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DR. MARY HRBBLEWHITE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBBLEWHITE, MARY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SANDY SPRINGS, GA 30328		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) DR. MARY HRBBLEWHITE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1760/4629 Rpt: 1763/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN, LMSW		9 Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH ORESBYTERIAN HOSPICE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1761/4629 Rpt: 1764/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75230		
8 Principal occupation / Job title (See Instructions) RN, LMSW		9 Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1762/4629 Rpt: 1765/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN, LMSW		9 Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH ORESBYTERIAN HOSPICE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1763/4629 Rpt: 1766/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75230		
8 Principal occupation / Job title (See Instructions) RN, LMSW		9 Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBLEY, SANDI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RN, LMSW		Employer (See Instructions) FAITH PRESBYTERIAN HOSPICE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEBRON, DUNI	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HECKER, MARVIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1764/4629 Rpt: 1767/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HECKER, MARVIN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78746		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEDERMAN, THOMAS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ST LOUIS, MO 63104		
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) DATAMAX
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEDLEY, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEFFERNAN, JOYCE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WOODLAND PARK, NJ 07424-4287		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEFNER, NICOLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) COPY EDITOR		Employer (See Instructions) TEXAS STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1765/4629 Rpt: 1768/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEGAR, REBECCA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LA GRANGE, TX 78945		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEGAR, REBECCA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LA GRANGE, TX 78945		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEGAR, REBECCA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LA GRANGE, TX 78945		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEGMAN, CHRISTINA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL LAGO, TX 77586		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) DOW CHEMICAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEID, JANICE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PEORIA, AZ 85383-2661		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1766/4629 Rpt: 1769/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIDENREICH, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751-1932	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) AUDIO ENGINEER		9 Employer (See Instructions) UNIVERSITY OF TEXAS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIDKE, J. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIGERT, RYAN <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98687	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) AMADEUS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEIN, WERNER <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINEN, HUBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1767/4629 Rpt: 1770/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINRICH, KARIN <hr/> 6 Contributor address; City; State; Zip Code FLORESVILLE, TX 78114	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINRICH, KARIN <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINRITZ, JASON <hr/> Contributor address; City; State; Zip Code KATY, TX 77493	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) HOMEBUILDER
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINTZELMAN, CHRIS <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SERCO NA
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINTZELMAN, CHRIS <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SERCO NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1768/4629 Rpt: 1771/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEINZELMANN, ANNA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77077	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		9 Employer (See Instructions) LONE STAR COLLEGE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEISERMAN, SONYA <hr/> Contributor address; City; State; Zip Code SPRING VALLEY, CA 91977	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEISERMAN, SONYA <hr/> Contributor address; City; State; Zip Code SPRING VALLEY, CA 91977	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEISSER, TRENT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) CVS HEALTH
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEITING, HEATHER <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUYER		Employer (See Instructions) SIEMENS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1769/4629 Rpt: 1772/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEITING, HEATHER <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BUYER		9 Employer (See Instructions) SIEMENS
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEJNY, MARGARET <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) RANCH MANAGER		Employer (See Instructions) RISA RANCH
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEJNY, MARGARET <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) RANCH MANAGER		Employer (See Instructions) RISA RANCH
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELD, EILEEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729-7336	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) AHFH
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELEN KRAUS, MARY <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1770/4629 Rpt: 1773/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELFAND, JERRY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELFAND, MARCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MARCY C. HELFAND, P.C.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELFAND, MARCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MARCY C. HELFAND, PC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELFMAN, LAURA <hr/> Contributor address; City; State; Zip Code MARSHALL, NC 28753	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELGE, NANCY <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1771/4629 Rpt: 1774/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELGERUD, RUTH <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LONE STAR COLLEGE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELGERUD, RUTH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LONE STAR COLLEGE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELGERUD, RUTH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LONE STAR COLLEGE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELINSKI, CYNTHIA <hr/> Contributor address; City; State; Zip Code WESTMINSTER, CO 80234	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DISABILITY ANALYST		Employer (See Instructions) NYS OTDA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELLER, JAMES <hr/> Contributor address; City; State; Zip Code RENO, NV 89503	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1772/4629 Rpt: 1775/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELLERMAN, NATHANAEL <hr/> 6 Contributor address; City; State; Zip Code BEDFORD, TX 76021	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		9 Employer (See Instructions) TEXAS CHRISTIAN UNIVERSITY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELLERMAN, NATHANAEL <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) TEXAS CHRISTIAN UNIVERSITY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELLUMS, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) SACHEM, INC
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELLUMS, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) SACHEM, INC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMAN, KENNETH <hr/> Contributor address; City; State; Zip Code GOODYEAR, AZ 85395	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE COACH		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1773/4629 Rpt: 1776/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMCAMP, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROGRAM MANAGER		9 Employer (See Instructions) DELL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMICK, CHERYL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMS, ANN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMS, ANN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMS, MERRILL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1774/4629 Rpt: 1777/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELMS, MERRILL <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMENWAY, MARK <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) GEOFFREY C. HEMENWAY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMENWAY, MARK <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28210	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) GEOFFREY C. HEMENWAY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMINGWAY, DAVID <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH ATTORNEY		Employer (See Instructions) FEDERAL PUBLIC DEFENDERS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEMMETER, TRACY <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95119	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1775/4629 Rpt: 1778/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDEREK, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, CHADRICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HENDERSON LAW GROUP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, DAVID <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, DAVID <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, DAVID <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1776/4629 Rpt: 1779/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, DAVID <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, DAVID <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, EVERLENE <hr/> Contributor address; City; State; Zip Code ORIENTAL, NC 28571	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, HILLARY <hr/> Contributor address; City; State; Zip Code DECATUR, GA 30030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF PRODUCT STRATEGY		Employer (See Instructions) CLEARLEAP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1777/4629 Rpt: 1780/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, HILLARY <hr/> 6 Contributor address; City; State; Zip Code DECATUR, GA 30030	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OF PRODUCT STRATEGY		9 Employer (See Instructions) CLEARLEAP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, JOE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, JOE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, KAREN <hr/> Contributor address; City; State; Zip Code LOMITA, CA 90717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) NATIONAL WESTERN LIFE INS CO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1778/4629 Rpt: 1781/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, LEE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLITICAL STRATEGIST		9 Employer (See Instructions) EVERYTOWN FOR GUN SAFETY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, LEE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLITICAL STRATEGIST		Employer (See Instructions) EVERYTOWN FOR GUN SAFETY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, RUBY <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, SCOTT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) DEVOPS ENGINEER		Employer (See Instructions) BLOCKCHAIN GAME PARTNERS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, SCOTT <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) DEVOPS ENGINEER		Employer (See Instructions) BLOCKCHAIN GAME PARTNERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1779/4629 Rpt: 1782/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, SCOTT <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) DEVOPS ENGINEER		9 Employer (See Instructions) BLOCKCHAIN GAME PARTNERS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, CHARLIENE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1780/4629 Rpt: 1783/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, JOHN <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75074	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKS, LYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FIELD REP		Employer (See Instructions) LIUNA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKSON, COOWEESTA <hr/> Contributor address; City; State; Zip Code HALTOM CITY, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FULFILLMENT ASSOCIATE (BOX PACKER)		Employer (See Instructions) AMAZON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1781/4629 Rpt: 1784/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKSON, COOWEESTA <hr/> 6 Contributor address; City; State; Zip Code HALTOM CITY, TX 76137	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) FULFILLMENT ASSOCIATE (BOX PACKER)		9 Employer (See Instructions) AMAZON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKSON, SHARON <hr/> Contributor address; City; State; Zip Code AVONDALE, AZ 85392	Amount of Contribution (\$) \$18.40
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKSON, SHARON <hr/> Contributor address; City; State; Zip Code AVONDALE, AZ 85392	Amount of Contribution (\$) \$18.40
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKSON, SHARON <hr/> Contributor address; City; State; Zip Code AVONDALE, AZ 85392	Amount of Contribution (\$) \$18.40
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRICKSON, SHARON <hr/> Contributor address; City; State; Zip Code AVONDALE, AZ 85392	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1782/4629 Rpt: 1785/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRIX, SHERRIE <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDRYX, KEVIN <hr/> Contributor address; City; State; Zip Code VERONA, WI 53593	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENKIN, MICHELLE <hr/> Contributor address; City; State; Zip Code NEW HARBOR, ME 04554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENKIN, MICHELLE <hr/> Contributor address; City; State; Zip Code NEW HARBOR, ME 04554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1783/4629 Rpt: 1786/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1784/4629 Rpt: 1787/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		9 Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, DONALD <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSIONAL MUSICIAN		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, HUDSON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) RE DEVELOPER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CONTRACT SOFTWARE TESTER		Employer (See Instructions) SIGNPOST

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1785/4629 Rpt: 1788/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENLEY, KELLY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONTRACT SOFTWARE TESTER		9 Employer (See Instructions) SIGNPOST
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNEN, CHRISTINA <hr/> Contributor address; City; State; Zip Code FAIRVIEW, WV 26570	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNEN, CHRISTINA <hr/> Contributor address; City; State; Zip Code FAIRVIEW, WV 26570	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNEN, CHRISTINA <hr/> Contributor address; City; State; Zip Code FAIRVIEW, WV 26570	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNEN, CHRISTINA <hr/> Contributor address; City; State; Zip Code FAIRVIEW, WV 26570	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1786/4629 Rpt: 1789/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNES, SCOTT <hr/> 6 Contributor address; City; State; Zip Code DURHAM, NC 27705	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNES, SCOTT <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27705	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNING, ELISABETH <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNING, ELISABETH <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNING, JEAN <hr/> Contributor address; City; State; Zip Code MORRISONVILLE, WI 53571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1787/4629 Rpt: 1790/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENNING, KEVIN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006-5934	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, CAMDEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SUBSTITUTE		Employer (See Instructions) CCISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, GLENDA <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INDEPENDENT ASSOC		Employer (See Instructions) LEGAL SHIELD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, GLENDA <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INDEPENDENT ASSOC		Employer (See Instructions) LEGAL SHIELD
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, GLENDA <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INDEPENDENT ASSOC		Employer (See Instructions) LEGAL SHIELD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1788/4629 Rpt: 1791/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JEANINE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78722		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JEANINE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78722		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ANGLETON, TX 77515		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JOHN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ANGLETON, TX 77515		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JULIANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1789/4629 Rpt: 1792/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JULIANNE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77055		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JULIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SBISD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, JULIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SBISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, LARUE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code ATHENS, NY 12015		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1790/4629 Rpt: 1793/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN <hr/> 6 Contributor address; City; State; Zip Code ATHENS, NY 12015	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN <hr/> Contributor address; City; State; Zip Code ATHENS, NY 12015	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1791/4629 Rpt: 1794/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRY, MARY ELLEN <hr/> 6 Contributor address; City; State; Zip Code ATHENS, NY 12015	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSCHEN, ROBERT J <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSLEY, JANE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSLEY, JANE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSON, ABIGAIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		Employer (See Instructions) PROTIVITI, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1792/4629 Rpt: 1795/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSON, ABIGAIL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		9 Employer (See Instructions) PROTIVITI, INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSTRAND, ANN <hr/> Contributor address; City; State; Zip Code SEARSMONT, ME 04973	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HENSTRAND ASSOCIATES, INC.
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEPLER, RON <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$4.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEPLER, RON <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEPLER, RON <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$4.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1793/4629 Rpt: 1796/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERBERG, CRAIG <hr/> 6 Contributor address; City; State; Zip Code FAIRFAX, VA 22032	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT CONSULTANT		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERBERT, EMILY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232-1549	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERBERT, GEORGIA <hr/> Contributor address; City; State; Zip Code THE PLAINS, VA 20198	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) GEORGIA H. HERBERT, P.C.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERBERTSON, PHYLLIS <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERBIG, MARGARET A. <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) THE UNEMPLOYED PHILOSOPHERS GUILD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1794/4629 Rpt: 1797/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, CARLY <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19144	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) JEWELRY DESIGNER		9 Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, GUY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TRAVIS COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1795/4629 Rpt: 1798/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> 6 Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	7 Amount of Contribution (\$) \$33.00
8 Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		9 Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRAVERSE CITY, MI 49684	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1796/4629 Rpt: 1799/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> 6 Contributor address; City; State; Zip Code TRaverse CITY, MI 49684	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		9 Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRaverse CITY, MI 49684	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, MARK <hr/> Contributor address; City; State; Zip Code TRaverse CITY, MI 49684	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) SOLE OWNER, FINANCIAL ADVISOR		Employer (See Instructions) SELF, SOLE, UP NORTH FINANCIAL, LLC
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERMAN, PEGGY <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ALEXIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COORDINATOR		Employer (See Instructions) ROWAN STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1797/4629 Rpt: 1800/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ANA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77251	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		9 Employer (See Instructions) STATE REPRESENTATIVE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77251	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) STATE REPRESENTATIVE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, BENJAMIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77047	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, CARLOS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) BOSTON CONSULTING GROUP
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, CLARABETH <hr/> Contributor address; City; State; Zip Code FLOWERMOUND, TX 75022	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) JUANLAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1798/4629 Rpt: 1801/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ELVIA <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75036	7 Amount of Contribution (\$) \$20.22
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ELVIA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, ELVIRA <hr/> Contributor address; City; State; Zip Code DONNA, TX 78537	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) LGBS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, IRENE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MNGR		Employer (See Instructions) BCDP
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, IRENE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MERCHANDIZER		Employer (See Instructions) LMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1799/4629 Rpt: 1802/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, IRENE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MERCHANDIZER		9 Employer (See Instructions) LMS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, JOSE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SELF EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, JOSE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) PESCADOR PUBLIC STRATEGIES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) PESCADOR PUBLIC STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1800/4629 Rpt: 1803/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, LAURA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78730	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		9 Employer (See Instructions) PESCADOR PUBLIC STRATEGIES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, LISA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DOME-EDROY ISD
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, LISA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DOME-EDROY ISD
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, LISA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78407	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DOME-EDROY ISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, MANUEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1801/4629 Rpt: 1804/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, OREN <hr/> 6 Contributor address; City; State; Zip Code COOS BAY, OR 97420	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) TELECOM ENGINEER		9 Employer (See Instructions) SYKES ENTERPRISES INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, OREN <hr/> Contributor address; City; State; Zip Code COOS BAY, OR 97420	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TELECOM ENGINEER		Employer (See Instructions) SYKES ENTERPRISES INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, SASHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) FULCRUM PUBLIC AFFAIRS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, SASHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) FULCRUM PUBLIC AFFAIRS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, SASHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) FULCRUM PUBLIC AFFAIRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1802/4629 Rpt: 1805/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ-FUMERO, ALEJANDRO <hr/> 6 Contributor address; City; State; Zip Code GLENDALE, CA 91207	7 Amount of Contribution (\$) \$10.70
8 Principal occupation / Job title (See Instructions) PRODUCER		9 Employer (See Instructions) KEY RAY INC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNDON, CHAD <hr/> Contributor address; City; State; Zip Code FIRE ISLAND PINES, NY 11782	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNHOLM, CAMERON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75223	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPO		Employer (See Instructions) NEXUS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSISTANT DIRECTOR		Employer (See Instructions) UNIVERSITY OF TEXAS HOUSTON
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSISTANT DIRECTOR		Employer (See Instructions) UNIVERSITY OF TEXAS HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1803/4629 Rpt: 1806/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77020	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) UTHEALTH HOUSTON
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, HENRY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COOK/MEAT CUTTER		Employer (See Instructions) RUDY'S BBQ AND COUNTRY STORE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRERA, DANIELA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PARTNER OPS MANAGER		Employer (See Instructions) GOOGLE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRERA, KIMBERLY <hr/> Contributor address; City; State; Zip Code PARKLAND, FL 33076	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRERA, MERCEDES <hr/> Contributor address; City; State; Zip Code LINDSAY, CA 93247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1804/4629 Rpt: 1807/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRERA, RAFAEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) WASTE		9 Employer (See Instructions) IMG
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRICK, KATHIE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRICK, KATHIE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRICK, RUTH <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77378	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) ENTERTAINER		Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRICK, RUTH <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77378	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENTERTAINER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1805/4629 Rpt: 1808/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRING, CHARLES <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) HERRING & PANZER, LLP
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRING, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code ANNA, TX 75408	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRING, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code ANNA, TX 75408	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERRING, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERSCH, JUDITH <hr/> Contributor address; City; State; Zip Code REDONDO BEACH, CA 90277	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS COACH		Employer (See Instructions) JUDY HERSCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1806/4629 Rpt: 1809/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERSH, CAROL <hr/> 6 Contributor address; City; State; Zip Code GREAT NECK, NY 11023-1307	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERSH, EMILY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) AUSTIN INDEPENDENT SCHOOL DISTRICT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERSHBERGER, DAVID <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) BOSTON DYNAMICS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERTZMARK, ELLEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) HARVARD UNIVERSITY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERTZMARK, ELLEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) HARVARD UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1807/4629 Rpt: 1810/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERWIG, JUDY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERWIG, JUDY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERZELE, CHARLOTTE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERZOG, JOANNE <hr/> Contributor address; City; State; Zip Code LOUISIANA, MO 63353	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESKETT, KERI <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL COUNSELOR		Employer (See Instructions) GHOLSON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1808/4629 Rpt: 1811/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, CHERYL <hr/> 6 Contributor address; City; State; Zip Code BERKEKEY, CA 94707	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, CHERYL <hr/> Contributor address; City; State; Zip Code BERKEKEY, CA 94707	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, DIANNE <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT EXECUTIVE		Employer (See Instructions) GBCO
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, DIANNE <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT EXECUTIVE		Employer (See Instructions) GBCO
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, JANET <hr/> Contributor address; City; State; Zip Code WARREN, MI 48090	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1809/4629 Rpt: 1812/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, LYNN <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) COPYWRITER		9 Employer (See Instructions) IVIE & ASSOCIATES
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, LYNN <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COPYWRITER		Employer (See Instructions) IVIE & ASSOCIATES
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, LYNN <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COPYWRITER		Employer (See Instructions) IVIE & ASSOCIATES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, MYRON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MYRON HESS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, MYRON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MYRON HESS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1810/4629 Rpt: 1813/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, MYRON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MYRON HESS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESS, SUZANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75181	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) MARSH USA LLC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESTER, BEVERLY <hr/> Contributor address; City; State; Zip Code MATTHEWS, NC 28105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESTER, MICHAEL <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) SECUREONE
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HESTER, MICHAEL <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) SECUREONE

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1811/4629 Rpt: 1814/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HETHERINGTON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code SOUTH DENNIS, MA 02660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HETTRICH, DARCY <hr/> Contributor address; City; State; Zip Code MILFIRD, CT 06460	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEUSNER, DONNA <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPC		Employer (See Instructions) ATRIUM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEUSNER, DONNA <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28277	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPC		Employer (See Instructions) ATRIUM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEWAT, TRACY <hr/> Contributor address; City; State; Zip Code PROVIDENCE, RI 02906	Amount of Contribution (\$) \$1,024.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1812/4629 Rpt: 1815/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEWETT, DONALD <hr/> 6 Contributor address; City; State; Zip Code BURNET, TX 78611	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEWITT, KATHY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEY, ANNA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY/DEPUTY EXEC. DIRECTOR		Employer (See Instructions) DIOCESAN MIGRANT & REFUGEE SERVICES, INC.
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEY, ANNA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79924	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY/DEPUTY EXEC. DIRECTOR		Employer (See Instructions) DIOCESAN MIGRANT & REFUGEE SERVICES, INC.
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBS, KAREN <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EDUCATIONAL LIAISON		Employer (See Instructions) M.R. & EVELYN HUDSON FOUNDATION

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1813/4629 Rpt: 1816/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIBBS, KAREN <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76248	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL LIAISON		9 Employer (See Instructions) M.R. & EVELYN HUDSON FOUNDATION
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKERSON, KIMBERLY <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKERSON, TODD <hr/> Contributor address; City; State; Zip Code MANCHESTER, NH 03104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PEER SPECIALIST		Employer (See Instructions) HEALTHCARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKERSON, TODD <hr/> Contributor address; City; State; Zip Code MANCHESTER, NH 03104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PEER SPECIALIST		Employer (See Instructions) HEALTHCARE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKERSON, TODD <hr/> Contributor address; City; State; Zip Code MANCHESTER, NH 03104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PEER SPECIALIST		Employer (See Instructions) HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1814/4629 Rpt: 1817/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKERSON, TODD <hr/> 6 Contributor address; City; State; Zip Code MANCHESTER, NH 03104	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PEER SPECIALIST		9 Employer (See Instructions) HEALTHCARE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKMAN, DAMON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76126	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BELL TEXTRON
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKMAN, DAMON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76126	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BELL TEXTRON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKMAN, DRU ANN <hr/> Contributor address; City; State; Zip Code TRABUCO CANYON, CA 92679	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, AMYLIN <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) MARY MOODY NORTHEN ENDOWMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1815/4629 Rpt: 1818/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, AMYLIN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DICKINSON, TX 77539		
8 Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		9 Employer (See Instructions) MARY MOODY NORTHEN ENDOWMENT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, CARLEE	Amount of Contribution (\$) \$85.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) CARLEE HICKS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, LANE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) FUSE ARCHITECTURE STUDIO
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, LANE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) FUSE ARCHITECTURE STUDIO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, MAUREEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code STANTON, MI 48888		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1816/4629 Rpt: 1819/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, PAT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75238	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, PAT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, PAT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, PAT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, PAT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1817/4629 Rpt: 1820/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, PAT	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75238		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKS, TONI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) JARRELL ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKSON, DEMARC	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20019		
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) US HELPING US
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HICKSON SPAW, KIMBERLY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055-1927		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIESTAND, BRYAN	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code EL CERRITO, CA 94530		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) PUBNUB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1818/4629 Rpt: 1821/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGGINBOTHAM, ADRIAN <hr/> 6 Contributor address; City; State; Zip Code FLINT, TX 75762	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGGINBOTHAM, ADRIAN <hr/> Contributor address; City; State; Zip Code FLINT, TX 75762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGGINS, SHEILA <hr/> Contributor address; City; State; Zip Code PLEASANT HILL, CA 94523	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) TOWILL, INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHSMITH, EUSTACIA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90026	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1819/4629 Rpt: 1822/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, ANN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, EDWIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CALIBER
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, EDWIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CALIBER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) JUDICIARY		Employer (See Instructions) STATE OF TEXAS
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHWARDEN, CHERYL <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1820/4629 Rpt: 1823/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHWARDEN, CHERYL <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHWARDEN, CHERYL <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHWARDEN, CHERYL <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILBORN, ANN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILBURN, PEGGY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1821/4629 Rpt: 1824/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILBURN, PEGGY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILBURN, PEGGY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDEBRAND, DAVID	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDEBRAND, DAVID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDEBRAND, HENRY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1822/4629 Rpt: 1825/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDEBRAND, HENRY <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DALLAS ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDENBRAND, DICK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDERMAN, JULEE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDRETH, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDRETH, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1823/4629 Rpt: 1826/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILDRETH, JOHN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, ALMA <hr/> Contributor address; City; State; Zip Code MONEE, IL 60449	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, BARBARA <hr/> Contributor address; City; State; Zip Code SAN BENITO, TX 78586	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, CHRISTIAN <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MDM VENTURES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, CHRISTIAN <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MDM VENTURES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1824/4629 Rpt: 1827/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DEXTER <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77381	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DEXTER <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DONALD <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, GEORGE <hr/> Contributor address; City; State; Zip Code FALLS CHURCH, VA 22043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, GEORGE <hr/> Contributor address; City; State; Zip Code FALLS CHURCH, VA 22043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1825/4629 Rpt: 1828/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, J ACK <hr/> 6 Contributor address; City; State; Zip Code NEPTUNE CITY, NJ 07753	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JAMES <hr/> Contributor address; City; State; Zip Code BELMONT, DC 20000	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) SALES MANAGEMENT		Employer (See Instructions) BD
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JAMES <hr/> Contributor address; City; State; Zip Code BELMONT, DC 20000	Amount of Contribution (\$) \$1.87
Principal occupation / Job title (See Instructions) SALES MANAGEMENT		Employer (See Instructions) BD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, KARIE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) KAREN HILL, MD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, LYNDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1826/4629 Rpt: 1829/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, LYNDA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76102	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, MARIE <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, MONTE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MIXOLOGIST		Employer (See Instructions) BON APPETIT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, NORMA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RACHEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MCKINSEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1827/4629 Rpt: 1830/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RICHARD 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004-6604	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LINEBARGER LLP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RODNEY Contributor address; City; State; Zip Code GRASS VALLEY, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RODNEY Contributor address; City; State; Zip Code GRASS VALLEY, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RODNEY Contributor address; City; State; Zip Code GRASS VALLEY, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RODNEY Contributor address; City; State; Zip Code GRASS VALLEY, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1828/4629 Rpt: 1831/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RODNEY <hr/> 6 Contributor address; City; State; Zip Code GRASS VALLEY, CA 95949	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, RODNEY <hr/> Contributor address; City; State; Zip Code GRASS VALLEY, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, SANDRA <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35207	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, SHARON <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, TINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FEDERAL		Employer (See Instructions) DEPT OF DEFENSE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1829/4629 Rpt: 1832/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, TINA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) FEDERAL		9 Employer (See Instructions) DEPT OF DEFENSE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, TOMMY <hr/> Contributor address; City; State; Zip Code SAVANNAH, GA 31405	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, WINFIELD <hr/> Contributor address; City; State; Zip Code STONEHAM, MA 02180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) ROWLAND INSTITUTE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL JONES, DARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLBERRY, LESLIE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) FRONTLINE EDUCATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1830/4629 Rpt: 1833/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLBERRY, LESLIE <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) BUSINESS ANALYST		9 Employer (See Instructions) FRONTLINE EDUCATION
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLBERRY, LESLIE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) FRONTLINE EDUCATION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLEGAS, BOB <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLEGAS, BOB <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLEGAS, BOB <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1831/4629 Rpt: 1834/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78726	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) YOGA TEACHER		9 Employer (See Instructions) LASR
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) YOGA TEACHER		Employer (See Instructions) LASR
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) YOGA INSTRUCTOR		Employer (See Instructions) LASR
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) TSBVI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) TSBVI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1832/4629 Rpt: 1835/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78726	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) YOGA INSTRUCTOR		9 Employer (See Instructions) LASR
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLER, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) YOGA INSTRUCTOR		Employer (See Instructions) LASR
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLHOUSE, MARTHA <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) KLOECKNER METALS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLHOUSE, MARTHA <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) KLOECKNER METALS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLHOUSE, MARTHA <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) KLOECKNER METALS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1833/4629 Rpt: 1836/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLHOUSE, MARTHA <hr/> 6 Contributor address; City; State; Zip Code ALVIN, TX 77511	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		9 Employer (See Instructions) KLOECKNER METALS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLHOUSE, MARTHA <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) KLOECKNER METALS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIARD, CELIA <hr/> Contributor address; City; State; Zip Code SUWANEE, GA 30024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIARD, OLLIE <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIER, KAREN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1834/4629 Rpt: 1837/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIER, KAREN <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77802	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIER, KAREN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIER, KING <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP PUBLIC POLICY		Employer (See Instructions) HARRIS HEALTH SYSTEM
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIER, KING <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) VP PUBLIC POLICY		Employer (See Instructions) HARRIS HEALTH SYSTEM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLIER, ROBERT <hr/> Contributor address; City; State; Zip Code WACO, TX 76711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) FBC WEST

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1835/4629 Rpt: 1838/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLMAN, JASON	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BUDA, TX 78610		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLMAN, JASON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLMAN, KYA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILSENDAGER, FRANK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ELIZABETH, CO 80107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTON, ALEXANDRIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BELVEDERE TIBURON, CA 94920		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1836/4629 Rpt: 1839/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTON, ALEXANDRIA <hr/> 6 Contributor address; City; State; Zip Code BELVEDERE TIBURON, CA 94920	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTON, JEFF <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTON, JILL <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSING MANAGER		Employer (See Instructions) FUNIMATION ENTERTAINMENT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTON, JOANNE <hr/> Contributor address; City; State; Zip Code HILTON HEAD ISLAND, SC 29928	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) WORLEY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTON PACE, SHELLEY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER/DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1837/4629 Rpt: 1840/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTY, MARK <hr/> 6 Contributor address; City; State; Zip Code BARRINGTON, RI 02806	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILTY, MARK <hr/> Contributor address; City; State; Zip Code BARRINGTON, RI 02806	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIMMELSTEIN, SHERRY <hr/> Contributor address; City; State; Zip Code HAMPDEN, MA 01036-9698	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) VIP INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDIN, KAREN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF A. TOD HINDIN
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDMAN, JANNETTE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1838/4629 Rpt: 1841/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDS, GARETH <hr/> 6 Contributor address; City; State; Zip Code HYATTSVILLE, MD 20781	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINDS, JANICE <hr/> Contributor address; City; State; Zip Code WEST BABYLON, NY 11704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LPN		Employer (See Instructions) CITIZENS INC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINES, AYELET <hr/> Contributor address; City; State; Zip Code MOUNT RAINIER, MD 20712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) POLITICAL ORGANIZER		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINES, DAIMIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) HINESAD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINES, PAGE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1839/4629 Rpt: 1842/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINGER, CHARLES <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINMAN, BRIAN <hr/> Contributor address; City; State; Zip Code DEALE, MD 20751	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINMAN, BRIAN <hr/> Contributor address; City; State; Zip Code DEALE, MD 20751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, AMY AND ANGEL HINOJOSA <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHEM ENGINEER		Employer (See Instructions) CHEVRON
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, LAURA <hr/> Contributor address; City; State; Zip Code LYON TOWNSHIP, MI 48165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions) WTVS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1840/4629 Rpt: 1843/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, RICHARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77030-3504	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HINOJOSA LAW
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HINOJOSA LAW, PLLC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, SUSANA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNITED ISD
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA, SUSANA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNITED ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA-PARSONS, SARA <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1841/4629 Rpt: 1844/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA-PARSONS, SARA <hr/> 6 Contributor address; City; State; Zip Code HARLINGEN, TX 78550	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINOJOSA-PARSONS, SARA <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINSHAW, JOAN <hr/> Contributor address; City; State; Zip Code NOLANVILLE, TX 76559	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINSHAW, KIRK <hr/> Contributor address; City; State; Zip Code SONOMA, CA 95476	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINSHAW, KIRK <hr/> Contributor address; City; State; Zip Code SONOMA, CA 95476	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1842/4629 Rpt: 1845/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINSON, ELMA <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76207	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINSON, ELMA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTON, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTON, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1843/4629 Rpt: 1846/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1844/4629 Rpt: 1847/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HINTZE, STEVE <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIRSCHBOECK, ROBERT <hr/> Contributor address; City; State; Zip Code ASHLAND, OR 97520	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIRSH, JUDITH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HISLOP, MARTHA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) EDIBLE ARRANGEMENTS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HISSAM, TIMOTHY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TAX EXAMINING TECH		Employer (See Instructions) IRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1845/4629 Rpt: 1848/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, BETH <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77381	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, BETH <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, BETH <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, DANIEL <hr/> Contributor address; City; State; Zip Code CAPE CORAL, FL 33904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, ERIK <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-7561	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1846/4629 Rpt: 1849/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, ERIK <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-7561	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, ERIK <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-7561	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HITCHCOCK, ERIK <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-7561	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HLAVACEK, IAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CITY OF HOUSTON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HLAVACEK, IAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CITY OF HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1847/4629 Rpt: 1850/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HLAVINKA, BRYAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) SIEMENS ENERGY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, CHERYL <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96817	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, CHERYL <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96817	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, CHERYL <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96817	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, CHERYL <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96817	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1848/4629 Rpt: 1851/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, CHERYL <hr/> 6 Contributor address; City; State; Zip Code HONOLULU, HI 96817	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, MICHAEL <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, MICHAEL <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, NANCY <hr/> Contributor address; City; State; Zip Code NORTHEAST HARBOR, ME 04662	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) THE KIMBALL CORPORATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, NANCY <hr/> Contributor address; City; State; Zip Code NORTHEAST HARBOR, ME 04662	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) THE KIMBALL CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1849/4629 Rpt: 1852/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, NANCY <hr/> 6 Contributor address; City; State; Zip Code NORTHEAST HARBOR, ME 04662	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETAIL SALES		9 Employer (See Instructions) THE KIMBALL CORP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, SANDIE <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, TERESA <hr/> Contributor address; City; State; Zip Code LYNNWOOD, WA 98037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) COSTCO
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HO, WAYNE G. P. <hr/> Contributor address; City; State; Zip Code KAPOLEI, HI 96707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) DOE DEPT OF EDUCATION, STATE OF HI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOAG, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1850/4629 Rpt: 1853/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOAG, JOHN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78734		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOAGLAND, NANCY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MAPLE CITY, MI 49664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBART, ANN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PHOENIX, AZ 85003		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) STATE OF ARIZONA
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBBIE, NORA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76148		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) U.S. SMALL BUSINESS ADMINISTRATION
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBBIE, NORA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76148		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) U.S. SMALL BUSINESS ADMINISTRATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1851/4629 Rpt: 1854/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBBS, TERRY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77047		
8 Principal occupation / Job title (See Instructions) SUPERVISOR		9 Employer (See Instructions) HARRIS HEALTH SYSTEM
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBBS, TERRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77047		
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) HARRIS HEALTH SYSTEM
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBBY, PAUL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) GENESIS PARK
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBERMAN, LOUISA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) DIGITAL FINANCE		Employer (See Instructions) VISA
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBERMAN, LOUISA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) DIGITAL FINANCE		Employer (See Instructions) VISA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1852/4629 Rpt: 1855/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBLEY, DAVID	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LIVONIA, MI 48150		
8 Principal occupation / Job title (See Instructions) TAX CONSULTANT		9 Employer (See Instructions) ERNST & YOUNG
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBLEY, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LIVONIA, MI 48150		
Principal occupation / Job title (See Instructions) TAX CONSULTANT		Employer (See Instructions) ERNST & YOUNG
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOB RATSCHK, MARTIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78754		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) GOOGLE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOB RATSCHK, MARTIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78754		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) GOOGLE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOB RATSCHK, MARTIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78754		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) GOOGLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1853/4629 Rpt: 1856/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBRATSCHK, MARTIN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78754	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAM MANAGER		9 Employer (See Instructions) GOOGLE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBRATSCHK, MARTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) GOOGLE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOBRATSCHK, MARTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) GOOGLE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOCHSTRASSER, WILLIARD <hr/> Contributor address; City; State; Zip Code GROVES, TX 77619	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) TURNER INDUSTRIES
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOCHSTRASSER, WILLIARD <hr/> Contributor address; City; State; Zip Code GROVES, TX 77619	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) TURNER INDUSTRIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1854/4629 Rpt: 1857/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODDE, SAMMY <hr/> 6 Contributor address; City; State; Zip Code BRENHAM, TX 77833	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODDE, SAMMY <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGE, BOB <hr/> Contributor address; City; State; Zip Code SYRACUSE, NY 13210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, DAVID <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, GARY <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CIVIL & ENVIRONMENTAL CONSULTANTS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1855/4629 Rpt: 1858/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, GARY <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) RABA KISTNER
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, KAREN <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, MADELYN <hr/> Contributor address; City; State; Zip Code TOMALES, CA 94971	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, MADELYN <hr/> Contributor address; City; State; Zip Code TOMALES, CA 94971	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, RENATE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1856/4629 Rpt: 1859/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, RENATE	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code DENTON, TX 76210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, RENATE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, RENATE	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, RENATE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, TAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) EDUCATION AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1857/4629 Rpt: 1860/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOEPRICH, CASSANDRA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) CENTRAL HOUSTON
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFACKER, JUDITH <hr/> Contributor address; City; State; Zip Code SOUTH BEND, IN 46635	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFART, JORDAN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, BLAKE <hr/> Contributor address; City; State; Zip Code TALKING ROCK, GA 30175	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) THUNDERBIRD HOLDINGS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, CAITLIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) OFFERFIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1858/4629 Rpt: 1861/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, JOSEPH	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90041		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, JOSEPH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90041		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, JUDY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, JULIE	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code HIDEAWAY, TX 75771		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, JULIE	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code HIDEAWAY, TX 75771		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1859/4629 Rpt: 1862/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, KATRINA <hr/> 6 Contributor address; City; State; Zip Code PLANTERSVILLE, TX 77363	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, KATRINA <hr/> Contributor address; City; State; Zip Code PLANTERSVILLE, TX 77363	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, MARY ANN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) INDEPENDENT PRACTICE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, SHERI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIAGNOSTICIAN		Employer (See Instructions) INVOHEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1860/4629 Rpt: 1863/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, SUSAN <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) GAMING COMPANY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) GAMING COMPANY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFFMAN LACH, RUTH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SCHOOL PSYCHOLOGIST		Employer (See Instructions) SPECIALIZED ASSESSMENT AND CONSULTING
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFMANN, MICHELLE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97203-4708	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFMANOVA, ANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704-6117	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SYSCO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1861/4629 Rpt: 1864/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGAN, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code NEW CANEY, TX 77357	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SR ANALYST		9 Employer (See Instructions) CONTROLLED PRODUCTS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGAN, STEPHEN <hr/> Contributor address; City; State; Zip Code NEW CANEY, TX 77357	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SR ANALYST		Employer (See Instructions) CONTROLLED PRODUCTS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, CHARLES <hr/> Contributor address; City; State; Zip Code GREENSBORO, TX 77441	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, CHARLES <hr/> Contributor address; City; State; Zip Code GREENSBORO, TX 77441	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, CHARLES <hr/> Contributor address; City; State; Zip Code GREENSBORO, TX 77441	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1862/4629 Rpt: 1865/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, JON MARK <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, JON MARK <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, JON MARK <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, JON MARK <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGG, JON MARK <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1863/4629 Rpt: 1866/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGGARD, JOHN <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOGGARD, JOHN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOKE, ANGELA <hr/> Contributor address; City; State; Zip Code MT JUILET, TN 37122	Amount of Contribution (\$) \$44.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) ANGELA HOKE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLBROOK, MARK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77094	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLBROOK, WYNDEE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COORDINATOT		Employer (See Instructions) INTERFAITH SAN ANTONIO ALLIANCE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1864/4629 Rpt: 1867/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLCOMB, MARY CATHERINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) KIPP
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEMAN, ANNETTE <hr/> Contributor address; City; State; Zip Code ROUND TOP, TX 78954	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEMAN, ANNETTE <hr/> Contributor address; City; State; Zip Code ROUND TOP, TX 78954	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, GARNET <hr/> Contributor address; City; State; Zip Code GRASS VALLEY, CA 95945	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, RUTH <hr/> Contributor address; City; State; Zip Code JEFFERSON, ME 04348	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1865/4629 Rpt: 1868/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, RUTH <hr/> 6 Contributor address; City; State; Zip Code JEFFERSON, ME 04348	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDER, WAYNE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) BAYLOR SCOTT & WHITE HEALTH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDER, WAYNE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) BAYLOR SCOTT & WHITE HEALTH
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLGUIN JR., EDUARDO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF-EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLIFIELD, MILLIE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1866/4629 Rpt: 1869/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLADAY, JANICE <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76542	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAND, WALTER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78732	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAS, DEANNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GVP MINISTRY COORDINATOR		Employer (See Instructions) PRESBYTERIAN PEACE FELLOWSHIP
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAS, DEANNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GVP MINISTRY COORDINATOR		Employer (See Instructions) PRESBYTERIAN PEACE FELLOWSHIP
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAWAY, CAROL <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1867/4629 Rpt: 1870/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAWAY, CAROL <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAWAY, CAROL <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAWAY, CAROL <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLAWAY, CAROL <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLEMAN, VIRGINIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1868/4629 Rpt: 1871/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLEMAN, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75206	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLENSHEAD, TODD <hr/> Contributor address; City; State; Zip Code BENTON, LA 71006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLENSHEAD, TODD <hr/> Contributor address; City; State; Zip Code BENTON, LA 71006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLENSHEAD, TODD <hr/> Contributor address; City; State; Zip Code BENTON, LA 71006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLENSHEAD, TODD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VIDEOGAMES		Employer (See Instructions) SABER

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1869/4629 Rpt: 1872/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLERS, MARY <hr/> 6 Contributor address; City; State; Zip Code NORFOLK, VA 23508	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIDGE, MARGARET <hr/> Contributor address; City; State; Zip Code GLEN BURNIE, MD 21060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIDGE, MARGARET <hr/> Contributor address; City; State; Zip Code GLEN BURNIE, MD 21060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIER, DAWN <hr/> Contributor address; City; State; Zip Code VENICE, CA 90291	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIER, DAWN <hr/> Contributor address; City; State; Zip Code VENICE, CA 90291	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1870/4629 Rpt: 1873/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGER, JOHN <hr/> 6 Contributor address; City; State; Zip Code FLEMING ISLAND, FL 32003	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGER, JOHN <hr/> Contributor address; City; State; Zip Code FLEMING ISLAND, FL 32003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGER, JOHN <hr/> Contributor address; City; State; Zip Code FLEMING ISLAND, FL 32003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGER, JOHN <hr/> Contributor address; City; State; Zip Code FLEMING ISLAND, FL 32003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGSWORTH, HEIDI <hr/> Contributor address; City; State; Zip Code OVIEDO, FL 32765-8203	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1871/4629 Rpt: 1874/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGSWORTH, HEIDI <hr/> 6 Contributor address; City; State; Zip Code OVIEDO, FL 32765-8203	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINGSWORTH, INDRIA <hr/> Contributor address; City; State; Zip Code LANCASTER, MO 75134	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIVERSITY & INCLUSION MANAGER		Employer (See Instructions) JE DUNN CONSTRUCTION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINS, ALLISON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLINS, ALLISON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIS, COLIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NON PROFIT DIRECTOR		Employer (See Instructions) ICUT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1872/4629 Rpt: 1875/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLLIS, COLIN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NON PROFIT DIRECTOR		9 Employer (See Instructions) ICUT
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMAN, SULLY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) STATE OF TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, DONNA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, GRACE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST ASSISTANT		Employer (See Instructions) AVIATOR HOME HEALTH
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, HAL <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1873/4629 Rpt: 1876/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, HAL <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, JANET <hr/> Contributor address; City; State; Zip Code CASTROVILLE, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, PAULETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, STEPHEN <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, TODD <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85259	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) VETERINARIAN ASSISTANT		Employer (See Instructions) SCOTTSDALE RANCH ANIMAL HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1874/4629 Rpt: 1877/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES IV, OSCAR <hr/> 6 Contributor address; City; State; Zip Code WOOLWICH TOWNSHIP, NJ 08085	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) RUTGERS UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSCHER, LORETTA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34482	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSCHER, LORETTA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34482	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSCHER, LORETTA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34482	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSENBECK, STEPHEN <hr/> Contributor address; City; State; Zip Code WALTHAM, MA 02453	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1875/4629 Rpt: 1878/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSENBECK, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code WALTHAM, MA 02453	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSTEIN, SUSAN <hr/> Contributor address; City; State; Zip Code EVERETT, WA 98208	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) SENIOR MANAGEMENT ANALYST		Employer (See Instructions) SSA
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSTEIN, SUSAN <hr/> Contributor address; City; State; Zip Code EVERETT, WA 98208	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) SENIOR MANAGEMENT ANALYST		Employer (See Instructions) SSA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSTER, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSTER, RUSSELL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1876/4629 Rpt: 1879/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLSTROM, ANNA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code BOZEMAN, MT 59718		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLT, JENNIFER	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) ABBVIE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLT, KATHERINE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CASHIERS, NC 28717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLT, KATHERINE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CASHIERS, NC 28717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLT, PATRICIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PORTLAND, OR 97217-1111		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1877/4629 Rpt: 1880/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLTSHOUSER, SHERRELL <hr/> 6 Contributor address; City; State; Zip Code ANCHORAGE, AK 99515	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLTSHOUSER, SHERRELL <hr/> Contributor address; City; State; Zip Code ANCHORAGE, AK 99515	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZER, JEAN <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SYSTEMS & DATA ANALYST		Employer (See Instructions) THE BOEING COMPANY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZER, JEAN <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) SYSTEMS & DATA ANALYST		Employer (See Instructions) THE BOEING COMPANY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZER, JEAN <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SYSTEMS & DATA ANALYST		Employer (See Instructions) THE BOEING COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1878/4629 Rpt: 1881/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZER, JEAN <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) SYSTEMS & DATA ANALYST		9 Employer (See Instructions) THE BOEING COMPANY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZER, N <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZMAN, HARRY <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMMEL, SOLANGE <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549-3756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) HAMUMU GAMES INC
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMMEL, SOLANGE <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549-3756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) HAMUMU GAMES INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1879/4629 Rpt: 1882/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMMEL, SOLANGE <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76549-3756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		9 Employer (See Instructions) HAMUMU GAMES INC
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMMEL, SOLANGE <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549-3756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) HAMUMU GAMES INC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMMEL, SOLANGE <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549-3756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) HAMUMU GAMES INC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMMEL, SOLANGE <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549-3756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) HAMUMU GAMES INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HONHART, ANNE <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, MI 48009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1880/4629 Rpt: 1883/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HONS, BETHANY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOD, FELICIA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOD, RICHARD <hr/> Contributor address; City; State; Zip Code MOSHEIM, TN 37818	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOD, SHARRAN <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOD, WILLIAM <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98136	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1881/4629 Rpt: 1884/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOKEY, MARGARET <hr/> 6 Contributor address; City; State; Zip Code ANNANDALE, VA 22003	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HANNA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HANNA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HANNA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HANNA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1882/4629 Rpt: 1885/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HANNA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HELEN <hr/> Contributor address; City; State; Zip Code RUMSEY, CA 95679	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, HELEN <hr/> Contributor address; City; State; Zip Code RUMSEY, CA 95679	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, JONATHAN <hr/> Contributor address; City; State; Zip Code NO CITY PROVIDED, OK 73135	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) SOUTHWEST AIRLINES
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, KATHY <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1883/4629 Rpt: 1886/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, KATHY <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, MARK <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) CRYSTALLINEPHOENIX
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPINGARNER THIEL, HEATHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HR ATTORNEY		Employer (See Instructions) WOODSIDE ENERGY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOTON, THOMAS <hr/> Contributor address; City; State; Zip Code CORAL GABLES, FL 33146	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOTON, THOMAS <hr/> Contributor address; City; State; Zip Code CORAL GABLES, FL 33146	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1884/4629 Rpt: 1887/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOTON, THOMAS <hr/> 6 Contributor address; City; State; Zip Code CORAL GABLES, FL 33146	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, AMY <hr/> Contributor address; City; State; Zip Code BURNET, TX 78611	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ADMIN. ASSIST.		Employer (See Instructions) PROPERTY MANAGEMENT
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, CARRIE <hr/> Contributor address; City; State; Zip Code BURNET, TX 78611	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) AFFORDABLE HOUSING		Employer (See Instructions) HVM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, JIM <hr/> Contributor address; City; State; Zip Code NORTH OLMSTED, OH 44070	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, JIM <hr/> Contributor address; City; State; Zip Code NORTH OLMSTED, OH 44070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1885/4629 Rpt: 1888/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, JIM	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code NORTH OLMSTED, OH 44070		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, JIM	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code NORTH OLMSTED, OH 44070		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, KIMBERLY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MIAMI, FL 33131		
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) RED MULTIFAMILY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, KIMBERLY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MIAMI, FL 33131		
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) RED MULTIFAMILY
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, SHEILA C	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79413		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1886/4629 Rpt: 1889/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOVER, SHEILA C <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79413	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPE, HOLLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPE, JANET <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPF, DEREK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) DIRECTOR, OPERATIONS		Employer (See Instructions) OPEN PHILANTHROPY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPF, DEREK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218-3909	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) OPERATIONS DIRECTOR		Employer (See Instructions) OPEN PHILANTHROPY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1887/4629 Rpt: 1890/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPKINS, CAROL <hr/> 6 Contributor address; City; State; Zip Code WOODINVILLE, WA 98077	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPKINS, CAROL <hr/> Contributor address; City; State; Zip Code WOODINVILLE, WA 98077	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPKINS, GEORGE <hr/> Contributor address; City; State; Zip Code CHARLESTON, SC 29407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPKINS, MARSHALL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77049	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) ARCHER SYSTEMS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPKINS, SHELTON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1888/4629 Rpt: 1891/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPP, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPPEL, EMILY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VALUE CHAIN EMISSIONS ADVISOR		Employer (See Instructions) CHEVRON PHILLIPS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPPEL, EMILY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VALUE CHAIN EMISSIONS ADVISOR		Employer (See Instructions) CHEVRON PHILLIPS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPPER, CLAIR <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15224	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOPSON, CHUCK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) CHARLES HOPSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1889/4629 Rpt: 1892/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORAN, SUE <hr/> 6 Contributor address; City; State; Zip Code ROBBINSVILLE, NJ 08690	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) DIRECTOR, PV SYSTEMS		9 Employer (See Instructions) ACADIA PHARMACEUTICAL
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORAN, SUE <hr/> Contributor address; City; State; Zip Code ROBBINSVILLE, NJ 08690	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) DIRECTOR, PV SYSTEMS		Employer (See Instructions) ACADIA PHARMACEUTICAL
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORBELT, DONNA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORICK, HANNAH <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) DIRECTOR OF EDU AND PARTNERSHIPS		Employer (See Instructions) CRISIS CENTER OF WEST TEXAS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORICK, HANNAH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIR OF EDU & PARTNERSHIPS		Employer (See Instructions) CRISIS CENTER OF WEST TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1890/4629 Rpt: 1893/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORICK, HANNAH <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79761	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) DIR OF EDU & PARTNERSHIPS		9 Employer (See Instructions) CRISIS CENTER OF WEST TEXAS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORICK, HANNAH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNICATION AND DEVELOPMENT COORDINATOR		Employer (See Instructions) CRISIS CENTER OF WEST TEXAS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORICK, HANNAH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATION AND DEVELOPMENT COORDINATOR		Employer (See Instructions) CRISIS CENTER OF WEST TEXAS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORICK, HANNAH <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79761	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATION AND DEVELOPMENT COORDINATOR		Employer (See Instructions) CRISIS CENTER OF WEST TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORN, CLAUDIA <hr/> Contributor address; City; State; Zip Code MERIDIAN, ID 83646	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) UM RECYCLING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1891/4629 Rpt: 1894/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORNING, DIXIE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94118		
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) UCSF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORNING, PHYLLIS	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code PORT HURON, MI 48060		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORNING, PHYLLIS	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code PORT HURON, MI 48060		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORNSBY, YOKIKA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) HARMONY SCIENCE ACADEMY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORNSBY, YOKIKA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) HARMONY SCIENCE ACADEMY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1892/4629 Rpt: 1895/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOROBEC, ELAINE <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOROBEC, ELAINE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTICK, CHRISTINE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTICK, CHRISTINE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTICK, CHRISTINE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1893/4629 Rpt: 1896/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTICK, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, COREY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) AUREA
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, K <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, KONETTE <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) LAKEWOOD ASSITED LIVING
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, KONETTE <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) LAKEWOOD ASSITED LIVING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1894/4629 Rpt: 1897/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, MAUR <hr/> 6 Contributor address; City; State; Zip Code KEIZER, OR 97303	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) MINISTER		9 Employer (See Instructions) WOODLAND CHAPEL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, MAUR <hr/> Contributor address; City; State; Zip Code KEIZER, OR 97303	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) WOODLAND CHAPEL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, MAUR <hr/> Contributor address; City; State; Zip Code KEIZER, OR 97303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) WOODLAND CHAPEL
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, ROBERT <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76118	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, ROBERT <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76118	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1895/4629 Rpt: 1898/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, WILLIAM <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORVATH, PAMELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) GISD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORVATH, PAMELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) GISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORWITZ, CHRIS <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ELECTROGRIP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORWITZ, CHRIS <hr/> 6 Contributor address; City; State; Zip Code PITTSBURGH, PA 15217	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) ELECTROGRIP
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORWITZ, CHRIS <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15217	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ELECTROGRIP
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORWITZ, SANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) CVS MINUTE CLINIC
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORWITZ, SANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) CVS MINUTE CLINIC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOSKINS, JAY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) AIRCRAFT MECHANIC		Employer (See Instructions) LOCKHEED MARTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1897/4629 Rpt: 1900/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOSKISNON, LILLIAN <hr/> 6 Contributor address; City; State; Zip Code VICTORIA, TX 77904	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOSSLER, DON <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, IN 47401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOSTETLER, MICHAEL <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, IN 47401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) ENVISAGE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUCHINS, NATALIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) INTUIT
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUCK, MARCIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1898/4629 Rpt: 1901/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUCK, MARCIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUCK, MARCIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUGH, DAVID <hr/> Contributor address; City; State; Zip Code WINSTNSALEM, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUGH, DAVID <hr/> Contributor address; City; State; Zip Code WINSTNSALEM, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUGH, DAVID <hr/> Contributor address; City; State; Zip Code WINSTNSALEM, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1899/4629 Rpt: 1902/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUGHTON, TED	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code TEXAS EL PASO, TX 79901		
8 Principal occupation / Job title (See Instructions) PRINCIPAL		9 Employer (See Instructions) HOUGHTON FINANCIAL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUGHTON, TED	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code EL PASO, TX 79901		
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) HOUGHTON FINANCIAL
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOULIHAN, RITA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code NY, NY 10025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOURIHAN, THOMAS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEWINGTON, NH 03801		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSE, JONATHAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LEAVENWORTH, KS 66048		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1900/4629 Rpt: 1903/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSE, MY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728-4542	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TECHNICAL PROGRAM DIRECTOR		9 Employer (See Instructions) CHARLES SCHWAB
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSE, MY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728-4542	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TECHNICAL PROGRAM DIRECTOR		Employer (See Instructions) CHARLES SCHWAB
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON, CRISARLA <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) MCLENNAN COMMUNITY INVESTMENT FUND
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON, DARRYL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON, DARRYL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON, PAM <hr/> 6 Contributor address; City; State; Zip Code LAWRENCE, KS 66046	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON, PAM <hr/> Contributor address; City; State; Zip Code LAWRENCE, KS 66046	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUSTON, SUSAN <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOUTMAN, KAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TALENT ACQUISITION		Employer (See Instructions) ROBERT HALF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069-2869	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVEY, BRUCE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77069-2869	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOVEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, CHARLES <hr/> Contributor address; City; State; Zip Code BAXLEY, GA 31513	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, CHERYL <hr/> Contributor address; City; State; Zip Code SAN LORENZO, NM 88041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, CHERYL <hr/> Contributor address; City; State; Zip Code SAN LORENZO, NM 88041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code SACRAMENTO, CA 95825	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, ELIZABETH <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, ELIZABETH <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, EVA <hr/> Contributor address; City; State; Zip Code WESTFIELD, MA 01085	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WEST SPRINGFIELD PUBLIC SCHOOLS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, GARY <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, HEATHER <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) LIFEPOINT HEALTH
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, HEATHER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) LIFEPOINT HEALTH
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, JANET <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, JANET <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, KRISTI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, KRISTI	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, KYLE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78756		
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) TEXAS DEPT. OF STATE HEALTH SERVICES
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, KYLE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78756		
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) TEXAS DEPT. OF STATE HEALTH SERVICES
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, KYLE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78756		
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) TEXAS DEPT. OF STATE HEALTH SERVICES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, MARC AND VICKIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MIDLAND, TX 79704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, MELANIE <hr/> 6 Contributor address; City; State; Zip Code SYOSSET, NY 11791	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, RANDALL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, RANDALL <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, SCOTT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019-3704	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, SCOTT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019-3704	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWARD, SCOTT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019-3704	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWDEN, NORMAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218-2318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWE, TAMMY <hr/> Contributor address; City; State; Zip Code LOWELL, MI 49331	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SARANAC ELEMENTARY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JOE <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY (RETIRED)		Employer (See Instructions) HOWELL MOORE & GOUGH LLP

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JULIE <hr/> 6 Contributor address; City; State; Zip Code CROCKETT, TX 75835	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELL, JULIE <hr/> Contributor address; City; State; Zip Code CROCKETT, TX 75835	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWELLS, LAURA <hr/> Contributor address; City; State; Zip Code APPLE VALLEY, CA 92307	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWLAND, MARIANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWLAND, MARIANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWLAND, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) DUFFEE + EITZEN
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOWZE, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOYLAND, CAROL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOYT, FELICITAS <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PAYROLL CONSULTANT		Employer (See Instructions) BAYSTATE HEALTH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HRKEL, ELIZABETH <hr/> Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92646	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HRKEL, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92646	7 Amount of Contribution (\$) \$1.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HSIAO, ALICE <hr/> Contributor address; City; State; Zip Code STAFFORD, TX 77477	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SPIRITUAL COUNSELOR		Employer (See Instructions) HEALING HOPE SPIRITUAL COUNSELING INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HU, DEQIANG <hr/> Contributor address; City; State; Zip Code NEW CANAAN, CT 06840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ALLSCRIPTS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HU, SERENA <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) STANFORD HEALTH CARE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HU, WEIBIN <hr/> Contributor address; City; State; Zip Code REDLANDS, CA 92373	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HU, WEIBIN <hr/> 6 Contributor address; City; State; Zip Code REDLANDS, CA 92373	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUANG, BELLA <hr/> Contributor address; City; State; Zip Code CARY, NC 27519	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) IPEARL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUANG, HUA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) PWC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUANG, LAWRENCE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUANG, WEI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) LEE HUANG &

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUBBARD, JOHN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) OMELVENY & MYERS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUBBARD, WANDA <hr/> Contributor address; City; State; Zip Code WILMINGTON, NC 28401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUBENAK, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUBER, WILLIAM <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79601	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CARPENTER		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUBERT, DAWNA <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) LIFE ASSOCIATION

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1913/4629 Rpt: 1916/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUCKABA, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78006	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUCKABA, CHRISTINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUCKABAY, KATHLEEN <hr/> Contributor address; City; State; Zip Code WAIKOLOA, HI 96738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUCKABAY, KATHLEEN <hr/> Contributor address; City; State; Zip Code WAIKOLOA, HI 96738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDAK, SHARON <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) MUSIC INSTRUCTOR		Employer (See Instructions) MUSIC & ARTS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1914/4629 Rpt: 1917/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDETZ, FRANK C. <hr/> 6 Contributor address; City; State; Zip Code WHEATON, IL 60189	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, GALEN <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, KATE <hr/> Contributor address; City; State; Zip Code CARBONDALE, CO 81623	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL ADVOCATE		Employer (See Instructions) WATERKEEPER ALLIANCE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, MELISA <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MCGREGOR ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, NEFF <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) USAA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1915/4629 Rpt: 1918/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, NEFF <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) USAA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, PATTI <hr/> Contributor address; City; State; Zip Code IDYLLWILDPINE COVE, CA 92549	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDSON, RONALD <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) DTCC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUDZ, TONY <hr/> Contributor address; City; State; Zip Code CANOGA PARK, CA 91304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUEBEL, MARTHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1916/4629 Rpt: 1919/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUEBEL, MARTHA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUEBEL, MARTHA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUENEMANN, GRACE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107		
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUERTA, CARLOS	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) TEXAS A&M UNIV.-CORPUS CHRISTI
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUERTA, CARLOS	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) TEXAS A&M UNIV.-CORPUS CHRISTI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1917/4629 Rpt: 1920/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFF, BRIDGETTE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code RICHMOND, VA 23223		
8 Principal occupation / Job title (See Instructions) WEB DESIGNER		9 Employer (See Instructions) UNOS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFF, CHERYL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ATLANTA, GA 30311		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFF, JAY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CARLSBAD, CA 92008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFF, MELINDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFF, MELINDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1918/4629 Rpt: 1921/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFF, SHERRELL <hr/> 6 Contributor address; City; State; Zip Code HEWITT, TX 76643	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUFFORD, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) WEB SITE DESIGNER		Employer (See Instructions) SELF-EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGGINS, DALE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMMERCIAL REALTY		Employer (See Instructions) MDH PROPERTIES
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGGINS, DALE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMMERCIAL REALTY		Employer (See Instructions) MDH PROPERTIES
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGGINS, DALE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMMERCIAL REALTY		Employer (See Instructions) MDH PROPERTIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1919/4629 Rpt: 1922/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGGINS, MARY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGGINS, SHANNON <hr/> Contributor address; City; State; Zip Code TUALATIN, OR 97062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATION COORDINATOR		Employer (See Instructions) CLEAN WATER SERVICES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, ANDRE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75227	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) MACHINE OPERATOR		Employer (See Instructions) CHRYSLER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, ASHLI RENEE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GRAPHIC WEB DESIGNER		Employer (See Instructions) ME
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, BOBBY <hr/> Contributor address; City; State; Zip Code COPPERAS COVE, TX 76522	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HOUSEKEEPING		Employer (See Instructions) VA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1920/4629 Rpt: 1923/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, FRANCIS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77044	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) TIETRONIX
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, GREG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, GREG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, GREG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, JULIE <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95065	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1921/4629 Rpt: 1924/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, LANNIE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75254	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, MICHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, MICHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, MICHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, MICHELLE <hr/> Contributor address; City; State; Zip Code HIGHLAND, TX 77562	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) MEMORIAL HERMANN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1922/4629 Rpt: 1925/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code HIGHLAND, TX 77562	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) MEMORIAL HERMANN
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, OLBY <hr/> Contributor address; City; State; Zip Code WESLACO, TX 78596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, OLBY <hr/> Contributor address; City; State; Zip Code WESLACO, TX 78596	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, PAM <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28216	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, ROBERT <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64108	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1923/4629 Rpt: 1926/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, SAMANTHA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SECRETAR		9 Employer (See Instructions) MORGAN LEWIS & BOCKIUS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, SAMANTHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SECRETAR		Employer (See Instructions) MORGAN LEWIS & BOCKIUS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, SUSAN <hr/> Contributor address; City; State; Zip Code INCLINE VILLAGE, NV 89450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, SUSAN <hr/> Contributor address; City; State; Zip Code INCLINE VILLAGE, NV 89450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHES, WILLIAM <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76302	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1924/4629 Rpt: 1927/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHEY, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code WASHOUGAL, WA 98671	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHEY, SCOTT <hr/> Contributor address; City; State; Zip Code LONGVIEW, WA 98632	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUGHEY, SCOTT <hr/> Contributor address; City; State; Zip Code LONGVIEW, WA 98632	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULEN, MARION <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULEN, MARION <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1925/4629 Rpt: 1928/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULEN, MARION <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, ALICE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, ALICE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, AMY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-9202	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) CLEANING TECH		Employer (See Instructions) GRAY CLEANING SERVICES
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, AMY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1926/4629 Rpt: 1929/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, BROOKE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
8 Principal occupation / Job title (See Instructions) INSURANCE AGENT		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, BRYLEY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SEATTLE, WA 98118-6082		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, CORINTHA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76116		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, CORINTHA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76116		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, DAN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) CONSTRUCTION MANAGER		Employer (See Instructions) NRP GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1927/4629 Rpt: 1930/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, JOHN	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77036		
8 Principal occupation / Job title (See Instructions) AVIATOR, MUSICIAN		9 Employer (See Instructions) JOHN HULL
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, KACI	Amount of Contribution (\$) \$145.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76087-9202		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, KACI	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76087		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, MEGAN	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20037		
Principal occupation / Job title (See Instructions) ACTIVIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, MEGAN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20037		
Principal occupation / Job title (See Instructions) ACTIVIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1928/4629 Rpt: 1931/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, MEGAN	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20037		
8 Principal occupation / Job title (See Instructions) ACTIVIST		9 Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, MEGAN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20037		
Principal occupation / Job title (See Instructions) ACTIVIST		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULLA, CONNOR	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WYLIE, TX 75098-5110		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSE, ANNA	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) MARKETING ASSISTANT		Employer (See Instructions) SERVICE EXPERTS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSE, ANNA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) MARKETING ASSISTANT		Employer (See Instructions) SERVICE EXPERTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1929/4629 Rpt: 1932/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSE, ANNA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) MARKETING ASSISTANT		9 Employer (See Instructions) SERVICE EXPERTS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSE, ANNA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MARKETING ASSISTANT		Employer (See Instructions) SERVICE EXPERTS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSE, CARLYSA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) IDGROUP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSEY, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77076	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSEY, PAMELA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1930/4629 Rpt: 1933/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULSEY, PAMELA <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76209	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMBERT, JILL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMBERT, JILL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMBY, IRMA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECH WRITER		Employer (See Instructions) HEAT AND CONTROL
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMME, ADELIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1931/4629 Rpt: 1934/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMMEL, CHARLENE <hr/> 6 Contributor address; City; State; Zip Code VACAVILLE, CA 95688	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) DOD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHREY, KELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION HEALTH
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHREY, KELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION HEALTH
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHREY, KELLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION HEALTH
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHREY, MARY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1932/4629 Rpt: 1935/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUMPHRIES, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNDLEY, MARGARET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025-3347	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNDT, COLE <hr/> Contributor address; City; State; Zip Code EAU CLAIRE, WI 54703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) INFORMATION TECHNOLOGY		Employer (See Instructions) TRADEPOINT SYSTEMS
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WILLIAM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) MATERIAL HANDLING AND CONTROLS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT SPECIALIST		Employer (See Instructions) MHC-CMI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1933/4629 Rpt: 1936/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM <hr/> 6 Contributor address; City; State; Zip Code HUMBLE, TX 77346	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PRODUCT SPECIALIST		9 Employer (See Instructions) MHC-CMI
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT SPECIALIST		Employer (See Instructions) MHC-CMI
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT SPECIALIST		Employer (See Instructions) MHC-CMI
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PRODUCT SPECIALIST		Employer (See Instructions) MHC-CMI
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MHC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1934/4629 Rpt: 1937/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNN, WM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HUMBLE, TX 77346		
8 Principal occupation / Job title (See Instructions) PRODUCT SPECIALIST		9 Employer (See Instructions) MHC-CMI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, AMY	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) LEGAL MARKETING		Employer (See Instructions) MUSE COMMUNICATIONS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, JOANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94108		
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELECT ONE SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, META	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1935/4629 Rpt: 1938/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, META	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78746		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, RANDY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DENTON, TX 76201		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, ALTHEA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33323		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, DIXIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CASTLE ROCK, CO 80109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COPPELL, TX 75019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1936/4629 Rpt: 1939/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code COPPELL, TX 75019	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER, ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) ROBIN HUNTER
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTER HEAD, BECKY <hr/> Contributor address; City; State; Zip Code PASADENA, TX 77504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNTING MANAGER		Employer (See Instructions) L-CON, INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNTPALMER, BRYN <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PODCASTER		Employer (See Instructions) SELF-EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNZIKER, J EMIL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1937/4629 Rpt: 1940/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNZIKER, J EMIL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURD, SUBRENA <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURD, SUBRENA <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURLEY, PAIGE <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) APPRAISER		Employer (See Instructions) CLINT HURLEY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURLEY, PAIGE <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) APPRAISER		Employer (See Instructions) CLINT HURLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1938/4629 Rpt: 1941/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURLEY, PAIGE <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) APPRAISER		9 Employer (See Instructions) CLINT HURLEY
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURSH, LYDIA H <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85718	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURSH, LYDIA H <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85718	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSAIN, NOMAAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HUSAIN LAW
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSAIN, NOMAAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HUSAIN LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1939/4629 Rpt: 1942/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSBAND, HELEN <hr/> 6 Contributor address; City; State; Zip Code ODESSA, TX 79763	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ECTOR COUNTY ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSCHLE, MARY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSCHLE, MARY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GARLAND ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSS, GARY <hr/> Contributor address; City; State; Zip Code MARYVILLE, TN 37801	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSSAIN, AMENA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HEATH TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1940/4629 Rpt: 1943/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSSAINI, ALY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSSAINI, ALY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSSEIN, ERIN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FUNDRAISER		Employer (See Instructions) COLUMBIA UNIVERSITY
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHENS, MARY <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHENS, MARY <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1941/4629 Rpt: 1944/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHINGS, HUTCH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHINSON, ALYSSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICY ANALYST		Employer (See Instructions) TX SENATE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHINSON, ALYSSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) POLICY ANALYST		Employer (See Instructions) SENATE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHISON CUCCO, KATHERINE <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHISON CUCCO, KATHERINE <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1942/4629 Rpt: 1945/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTCHISON CUCCO, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code SEABROOK, TX 77586	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTE, DARRELL <hr/> Contributor address; City; State; Zip Code LINCOLN, NE 68520	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTHWAITE, RO <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTHWAITE, RO <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTSON, HALEY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) PARIVEDA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1943/4629 Rpt: 1946/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTSON, HALEY <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) PARIVEDA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTTER, LOU N <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219-7624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEERING		Employer (See Instructions) LOU HUTTER CONSULTING
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTTO, HEATH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COST ACCOUNTANT		Employer (See Instructions) KINDER MORGAN
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUTTO, HEATH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COST ACCOUNTANT		Employer (See Instructions) KINDER MORGAN
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUYNH, JESSICA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SMITH AND VINSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1944/4629 Rpt: 1947/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUYNH, JESSICA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78737		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SMITH AND VINSON
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HWANG, PETER	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HWANG, WILLIAM	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code BROOKLINE, MA 02446		
Principal occupation / Job title (See Instructions) ASSISTANT EDITOR		Employer (See Instructions) BEDFORD/ST. MARTIN'S
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYATT, POLLY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75067		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYATT, POLLY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75067		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1945/4629 Rpt: 1948/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYDE, BILL <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640-5667	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) OPERATION		9 Employer (See Instructions) ARCXIS
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYDE, BILL <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-5667	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) OPERATION		Employer (See Instructions) ARCXIS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYDE, BRIDGET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYDE, LISA <hr/> Contributor address; City; State; Zip Code CLEBURNE, TX 76033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYDER, GEOFFREY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS AND MARKETING COORDINATOR		Employer (See Instructions) THE CLIBURN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1946/4629 Rpt: 1949/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYNE, JOYCE <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97219	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HYSER, PAMELA <hr/> Contributor address; City; State; Zip Code MECHANICSBURG, PA 17050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I, CECELIA <hr/> Contributor address; City; State; Zip Code LAKE STEVENS, WA 98258	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I HOVEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I HOVEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1947/4629 Rpt: 1950/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I HOVEY, BRUCE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77069	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I HOVEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) I HOVEY, BRUCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARA, WAYNE <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96814	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLERGY		Employer (See Instructions) MAKIKI CHRISTIAN CHURCH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARA, WAYNE <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96814	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLERGY		Employer (See Instructions) MAKIKI CHRISTIAN CHURCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1948/4629 Rpt: 1951/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARRA, ELIZA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75247	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) MULTIPLAN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARRA, JENNIFER <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EXP REALTY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARRA, JORGE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) DIRECTOR OF TRAFFIC OPERATIONS		Employer (See Instructions) GEOGESKE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARRA, SYLVIA <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94591	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) FIRST REPUBLIC BANK
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBARRA, SYLVIA <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94591	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) FIRST REPUBLIC BANK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1949/4629 Rpt: 1952/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBSEN, ASHLEY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723		
8 Principal occupation / Job title (See Instructions) DEVELOPMENT DIRECTOR		9 Employer (See Instructions) COUNCIL ON AT-RISK YOUTH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ICKLES, SUZI	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LORENA, TX 76655		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ICKLES, SUZI	Amount of Contribution (\$) \$157.40
Contributor address; City; State; Zip Code LORENA, TX 76655		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGNASIAK, CONNIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EASTPOINTE, MI 48021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGNASIAK, CONNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EASTPOINTE, MI 48021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1950/4629 Rpt: 1953/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGNASIAK, CONNIE	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code EASTPOINTE, MI 48021		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGNASIAK, CONNIE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code EASTPOINTE, MI 48021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGNASIAK, CONNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EASTPOINTE, MI 48021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGNATTI, LOUIS	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code WEBSTER, NY 14580		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGWE, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76137		
Principal occupation / Job title (See Instructions) F-35 FOM BLOCK 4 PROJECT MANAGER		Employer (See Instructions) LOCKHEED MARTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1951/4629 Rpt: 1954/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IGWE, ERIC <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) F-35 FOM BLOCK 4 PROJECT MANAGER		9 Employer (See Instructions) LOCKHEED MARTIN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILSEN, EVE <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80305	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1952/4629 Rpt: 1955/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> 6 Contributor address; City; State; Zip Code WILMINGTON, DE 19808	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1953/4629 Rpt: 1956/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code WILMINGTON, DE 19808		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WILMINGTON, DE 19808		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ILYAS, EMILY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WILMINGTON, DE 19808		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMAM, SARDAR	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) EXPERIS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMBODEN, ANNE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BALTIMORE, MD 21210-1305		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1954/4629 Rpt: 1957/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMBODEN, ANNE <hr/> 6 Contributor address; City; State; Zip Code BALTIMORE, MD 21210-1305	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMEL, PROFESSOR TAMMI IMEL <hr/> Contributor address; City; State; Zip Code NEW CASTLE, IN 47362	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMPERATORE, CATHERINE <hr/> Contributor address; City; State; Zip Code RESTON, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) ACTE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMPERATORE, CATHERINE <hr/> Contributor address; City; State; Zip Code RESTON, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) ACTE
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMPERATORE, CATHERINE <hr/> Contributor address; City; State; Zip Code RESTON, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) ACTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1955/4629 Rpt: 1958/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INAYATHULLAH, MOHAMMED <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TECHNOLOGY MANAGER		9 Employer (See Instructions) HUMANA INC
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INAYATHULLAH, MOHAMMED <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TECHNOLOGY MANAGER		Employer (See Instructions) HUMANA INC
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INAYATHULLAH, MOHAMMED <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TECHNOLOGY MANAGER		Employer (See Instructions) HUMANA INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INCIARDI, JOHN <hr/> Contributor address; City; State; Zip Code NOVATO, CA 94947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROESSOR		Employer (See Instructions) UNIVERSITY OF CALIFORNIA, SAN FRANCISCO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INESON, LISA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1956/4629 Rpt: 1959/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGALA, ROSE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76901		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGALA, ROSE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGALA, ROSE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGALA, ROSE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGERSON, JEAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73135		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1957/4629 Rpt: 1960/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGERSON, KATHLEEN	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code PORTLAND, OR 97214-1825		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGLIS, NANCY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGLIS, NANCY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGLIS, NANCY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGRAM, DANNY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1958/4629 Rpt: 1961/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGRAM, DANNY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGRAM, TANIA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INIGUEZ, MARIA DELOURDES <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) EL PASO ISD
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INNIS, ADRIENNE L <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INNIS, ADRIENNE L <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1959/4629 Rpt: 1962/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INNIS, ADRIENNE L <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INSLEY, DIANE <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY OF SAN MARCOS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> Contributor address; City; State; Zip Code WILMINGTON, DE 19808	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1960/4629 Rpt: 1963/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> 6 Contributor address; City; State; Zip Code WILMINGTON, DE 19808	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IPINA, MARIO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BOVAY ENGINEERS INC
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IPPOLITO, KAREN <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IPPOLITO, KAREN <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRESON, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703-1017	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1961/4629 Rpt: 1964/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRESON, DIANE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703-1017	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		9 Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRESON, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703-1017	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRIZARRY, DIANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) HUNTINGTON BANK
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRIZARRY, DIANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) HUNTINGTON BANK
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRVINE, MICHAEL <hr/> Contributor address; City; State; Zip Code BEXLEY, OH 43209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1962/4629 Rpt: 1965/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRVING, DIANA <hr/> 6 Contributor address; City; State; Zip Code BANNING, CA 92220	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRWIN, BETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRWIN, KAREN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79928	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRWIN, TERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HCA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISAACKS, E <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1963/4629 Rpt: 1966/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISALY, ELLEN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75357	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISALY, ELLEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75357	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISALY, ELLEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75357	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISALY, ELLEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75357	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISALY, ELLEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75357	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1964/4629 Rpt: 1967/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISCOE, NEIL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) TECHNOLOGY EXECUTIVE		9 Employer (See Instructions) RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISETT, CARL <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISHIBASHI, SUSIE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISHIBASHI, SUSIE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISHIBASHI, SUSIE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1965/4629 Rpt: 1968/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISKOW, LAWRENCE <hr/> 6 Contributor address; City; State; Zip Code GAITHERSBURG, MD 20878	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISKOW, LAWRENCE <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20878	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISKOW, LAWRENCE <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20878	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISSA, SHERRI <hr/> Contributor address; City; State; Zip Code FT LAUDERDALE, FL 33305	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) THERACOUNSEL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISSEROW, JINNY <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1966/4629 Rpt: 1969/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ITKIN, JASON <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ARNOLD & ITKIN LLP
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ITKIN, JASON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ARNOLD & ITKIN LLP
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ITKIN, JASON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ARNOLD & ITKIN LLP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVES, CARRIE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) PARAGON INNOVATIONS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, CRAIG <hr/> Contributor address; City; State; Zip Code TORNILLO, TX 79853	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1967/4629 Rpt: 1970/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, JIM <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) INVESTMENT MANAGER		9 Employer (See Instructions) HERMAN SMITH & CO
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, JIM <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, JIM <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INVESTMENT MANAGER		Employer (See Instructions) HERMAN SMITH & CO
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, JIM <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INVESTMENT MANAGER		Employer (See Instructions) HERMAN SMITH & CO
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, MADELYN <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1968/4629 Rpt: 1971/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, RICHARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77027-5105	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVEY, VIRGINIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78716	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) VIRGINIA IVEY REALTOR
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVORY, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) MENTOR COACH		Employer (See Instructions) UT
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVY, ANNETTE D <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78223	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVY, DARWYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704-4547	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1969/4629 Rpt: 1972/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IVY, DARWYN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704-4547	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IWANOWICZ, MICHAEL <hr/> Contributor address; City; State; Zip Code WATERTOWN, MA 02472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NETWORK ENGINEER		Employer (See Instructions) JACOBS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IZZO, NUNZIO <hr/> Contributor address; City; State; Zip Code HOBOKEN, NJ 07030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IZZO, NUNZIO <hr/> Contributor address; City; State; Zip Code HOBOKEN, NJ 07030	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. DOHERTY, JOANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1970/4629 Rpt: 1973/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, CAROL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75248		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, CAROL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1971/4629 Rpt: 1974/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, CAROL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACK, HOME <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKS, JUDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, CANDACE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ALDINE ISD
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, CHARLOTTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM COORDINATOR		Employer (See Instructions) HARRIS COUNTY CONSTABLE PCT 3

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1972/4629 Rpt: 1975/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, CHARLOTTE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77015	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROGRAM COORDINATOR		9 Employer (See Instructions) HARRIS COUNTY CONSTABLE PCT 3
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, CLAIRE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-5601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, DELORES <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, DELORES <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, DWIGHT <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) KLEIN ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1973/4629 Rpt: 1976/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JAMES <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) INDEPENDENT HOME HEALTH CARE INC
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JD <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JD <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JON <hr/> Contributor address; City; State; Zip Code VALLEY VILLAGE, CA 91601	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TELEVISION		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JOYCE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE - RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1974/4629 Rpt: 1977/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, JOYCE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78751		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE - RETIRED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, KENDALL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NIPOMO, CA 93444		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, KIRK	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) TOWING		Employer (See Instructions) A&R BRAKE SERVICE LLC
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, LORETTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EVANSTON, IL 60202		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, LORETTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EVANSTON, IL 60202		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1975/4629 Rpt: 1978/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code ANCHORAGE, AK 99501	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PROCESS ENGINEER		9 Employer (See Instructions) CONOCOPHILLPS
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, MATTHEW <hr/> Contributor address; City; State; Zip Code ANCHORAGE, AK 99501	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROCESS ENGINEER		Employer (See Instructions) CONOCOPHILLPS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, NORMAN <hr/> Contributor address; City; State; Zip Code DE BERRY, TX 75639	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, NORMAN <hr/> Contributor address; City; State; Zip Code DE BERRY, TX 75639	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, REBECCA <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32827	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1976/4629 Rpt: 1979/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, REED	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DENTON, TX 76209		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, REED	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, ROBERT	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77030		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code UPPER MARLBORO, MD 20792		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, ROBERT	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code UPPER MARLBORO, MD 20792		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1977/4629 Rpt: 1980/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, SARA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, SHARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, TAMMY <hr/> Contributor address; City; State; Zip Code WOODFORD, VA 22580	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, TAMMY <hr/> Contributor address; City; State; Zip Code WOODFORD, VA 22580	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, TAMMY <hr/> Contributor address; City; State; Zip Code WOODFORD, VA 22580	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1978/4629 Rpt: 1981/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, TAMMY <hr/> 6 Contributor address; City; State; Zip Code WOODFORD, VA 22580	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, TAMMY <hr/> Contributor address; City; State; Zip Code WOODFORD, VA 22580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, TAMMY <hr/> Contributor address; City; State; Zip Code WOODFORD, VA 22580	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, THOMASENE <hr/> Contributor address; City; State; Zip Code PARKTON, NC 28371	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CREW LEADER		Employer (See Instructions) CHIMES
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON JR., KEVIN M. <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) DEL VALLE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1979/4629 Rpt: 1982/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON JR., KEVIN M. <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		9 Employer (See Instructions) DEL VALLE ISD
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON JR., KEVIN M. <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) DEL VALLE ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON-GUIDRY, NECIA <hr/> Contributor address; City; State; Zip Code AUBREY, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, BINCY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, JOVITTA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) MD ANDERSON CANCER CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1980/4629 Rpt: 1983/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, NADETTE <hr/> 6 Contributor address; City; State; Zip Code HONEOYE FALLS, NY 14472	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOB, NADETTE <hr/> Contributor address; City; State; Zip Code HONEOYE FALLS, NY 14472	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, ALMA <hr/> Contributor address; City; State; Zip Code BURLINGTON, NC 27215	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, BRYAN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) SOLVAY SA
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, CAROL <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAND ADMIN MGR		Employer (See Instructions) AETHON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1981/4629 Rpt: 1984/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, CAROL <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LAND ADMIN MGR		9 Employer (See Instructions) AETHON
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KATHRYN <hr/> Contributor address; City; State; Zip Code CHELAN, WA 98816	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1982/4629 Rpt: 1985/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code CHELAN, WA 98816	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KATHRYN <hr/> Contributor address; City; State; Zip Code CHELAN, WA 98816	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KATHRYN <hr/> Contributor address; City; State; Zip Code CHELAN, WA 98816	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, KATHY <hr/> Contributor address; City; State; Zip Code CHELAN, WA 98816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ARCHITECT		Employer (See Instructions) SABRE, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, LARRY <hr/> Contributor address; City; State; Zip Code FOSTER CITY, CA 94404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1983/4629 Rpt: 1986/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBS, LENI <hr/> 6 Contributor address; City; State; Zip Code INDIO, CA 92203	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBSON, DAVID <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) UNIVERSITY OF CALIFORNIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBSON, JOSHUA <hr/> Contributor address; City; State; Zip Code BRADFORD, VT 05033	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOBSON, MARK <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742-1852	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACOVER, STUART <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60564	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) LOGISNEXT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1984/4629 Rpt: 1987/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAEGER, DELYSE <hr/> 6 Contributor address; City; State; Zip Code SONORA, TX 76950	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) VOLUNTEER		9 Employer (See Instructions) EATON HILL NATURE CENTER & PRESERVE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAEGER, RUDOLPH <hr/> Contributor address; City; State; Zip Code WESTWOOD, NJ 07675	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) TOXICOLOGIST		Employer (See Instructions) CH TECHNOLOGIES (USA) INC.
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAEGER, RUDOLPH <hr/> Contributor address; City; State; Zip Code WESTWOOD, NJ 07675	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TOXICOLOGIST		Employer (See Instructions) CH TECHNOLOGIES (USA) INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAGUR, PARMINDER <hr/> Contributor address; City; State; Zip Code EL DORADO HILLS, CA 95762	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PODIATRIST		Employer (See Instructions) VA
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAHNKE, RON <hr/> Contributor address; City; State; Zip Code EAST TROY, WI 53120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1985/4629 Rpt: 1988/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAIN, PUSHPENDRA <hr/> 6 Contributor address; City; State; Zip Code COOKEVILLE, TN 38501	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) CEO/CMC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAKOVAC, PAULA <hr/> Contributor address; City; State; Zip Code SHAWNEE, KS 66216	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAKSA, ANDREA <hr/> Contributor address; City; State; Zip Code PROVIDENCE VILLAGE, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAKSA, ANDREA <hr/> Contributor address; City; State; Zip Code PROVIDENCE VILLAGE, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAKUBOWSKI, JAY <hr/> Contributor address; City; State; Zip Code PROVINCETOWN, MA 02657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1986/4629 Rpt: 1989/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JALILI, FAHIMEH <hr/> 6 Contributor address; City; State; Zip Code WARREN, NJ 07059	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, CALVIN <hr/> Contributor address; City; State; Zip Code HAYWARD, CA 94542	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, PAMELA <hr/> Contributor address; City; State; Zip Code CONWAY, AR 72034	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, REBECCA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, SARAH <hr/> Contributor address; City; State; Zip Code PROSPER, TX 75078	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1987/4629 Rpt: 1990/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, SARAH <hr/> 6 Contributor address; City; State; Zip Code PROSPER, TX 75078	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SLP		9 Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, SYDNEY <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85225	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONFIGURATION MANAGEMENT		Employer (See Instructions) IRIDIUM SATELLITE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, THE HONORABLE AMETHYST <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SENIOR TELECOMMUNICATOR		Employer (See Instructions) CITY OF HOUSTON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES JR, ROY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76118	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES JR, ROY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76118	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1988/4629 Rpt: 1991/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES-DEHAAN, SUSAN <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75402	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) VERA WHOLE HEALTH
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES-DEHAAN, SUSAN <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) VERA WHOLE HEALTH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMESON, ELIZABETH <hr/> Contributor address; City; State; Zip Code CALGARY AB, DC 20000	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMIE MIMS, JAMIE MIMS <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ROSE LAWN CEMETERY
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMIE MIMS, JAMIE MIMS <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ROSE LAWN CEMETERY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1989/4629 Rpt: 1992/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMIESON, BOB <hr/> 6 Contributor address; City; State; Zip Code EDMONDS, WA 98020	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMIESON, BOB <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMIESON, ROBERT <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$67.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1990/4629 Rpt: 1993/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE	7 Amount of Contribution (\$) \$45.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79922		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL PASO, TX 79922		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL PASO, TX 79922		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EL PASO, TX 79922		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMISON, JAMIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL PASO, TX 79922		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1991/4629 Rpt: 1994/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMROG, NANCY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code MERRIMACK, NH 03054		
8 Principal occupation / Job title (See Instructions) MUSIC TEACHER		9 Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANAK, LARRY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code ROUND TOP, TX 78954		
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) IDCUS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANAK, LARRY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code ROUND TOP, TX 78954		
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) IDCUS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANE, BELINDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BATESVILLE, IN 47006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANE, MARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code TWIN FALLS, ID 83401		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1992/4629 Rpt: 1995/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANEWAY, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code BURLINGTON, VT 05401	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) THERAPIST		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANICEK, BETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JANICEK LAW
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANIK, CHLOE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANIK, CHLOE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) CHLOE JANIK
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANKS, PAMELA <hr/> Contributor address; City; State; Zip Code CONROE, TX 77302	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1993/4629 Rpt: 1996/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANKS, PAMELA <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77302	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANNESARI, SIANA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANTHO, PATTY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$107.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANZEN, RUSSELL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARAMILLO, DAVID <hr/> Contributor address; City; State; Zip Code WACO, TX 76705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DORM SUPERVISOR		Employer (See Instructions) TEXAS JUVENILE JUSTICE DEPARTMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1994/4629 Rpt: 1997/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARAMILLO, DAVID <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76705	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) DORM SUPERVISOR		9 Employer (See Instructions) TEXAS JUVENILE JUSTICE DEPARTMENT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARMON, ERIC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) WORKER		Employer (See Instructions) JOB
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARRAH, HIND <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARRETT, ALLI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GOLF ADMINISTRATION		Employer (See Instructions) TEXAS GOLF HALL OF FAME
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARVIS, KATY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1995/4629 Rpt: 1998/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASKO, RUDY J <hr/> 6 Contributor address; City; State; Zip Code LAKEWOOD, OH 44107	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASON, HILLIARD <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASON, HILLIARD <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASON, HILLIARD <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASON, HILLIARD <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80303	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1996/4629 Rpt: 1999/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASPERSEN, FAITH	7 Amount of Contribution (\$) \$124.00
6 Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JASSO, ALONSO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JATKO, BRENT	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAUREGUI, JOE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DONNA, TX 78537		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAUSSAUD, DANIELLE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1997/4629 Rpt: 2000/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAVA, VERONICA	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code QUINCY, CA 95971		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAVED, ABRAHIM	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) CO-FOUNDER & COO		Employer (See Instructions) CHARITYSTACK
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAVED, ABRAHIM	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) CHARITYSTACK
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAVRIL, MARCI	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MARINA DEL REY, CA 90292		
Principal occupation / Job title (See Instructions) HEALTH PROFESSIONAL		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAWORSKI, JOSEPH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JOSEPH S. JAWORSKI, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1998/4629 Rpt: 2001/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAWORSKI, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) JOSEPH S. JAWORSKI, P.C.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFERS, GAYLE <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFERS, GAYLE <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFFERS, JAMES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FREEMAN MILLS PC
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFTS, HEATHER <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1999/4629 Rpt: 2002/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEFTS, HEATHER	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEHAN, ALIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) SOCIAL MEDIA MANAGER		Employer (See Instructions) EVERCOMMERCE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, BRENDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NOLENSVILLE, TN 37135		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, BRENDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NOLENSVILLE, TN 37135		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, CAROL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2000/4629 Rpt: 2003/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, CAROL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GALVESTON, TX 77550		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, CAROL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, JOANN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, MATTHEW	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) ENVIRONMENTAL SPECIALIST		Employer (See Instructions) CITY OF HOUSTON HOUSING & COMMUNITY
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, MATTHEW	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) ENVIRONMENTAL SPECIALIST		Employer (See Instructions) CITY OF HOUSTON HOUSING & COMMUNITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2001/4629 Rpt: 2004/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, PEGGY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, RACHEL ANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, RACHEL ANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, ROGER <hr/> Contributor address; City; State; Zip Code PRESCOTT, AZ 86303-5752	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENKINS, ROSETTA <hr/> Contributor address; City; State; Zip Code BRONX, NY 10475	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNEDY, GEORGE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code WASHINGTON, PA 15105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNEMAN, KAREN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code WESTMINSTER, CO 80031		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, ALEXANDER	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92111		
Principal occupation / Job title (See Instructions) AUDITOR		Employer (See Instructions) DOD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, JANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) DANCE TEACHER		Employer (See Instructions) JRSOD
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, JANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) DANCE TEACHER		Employer (See Instructions) JRSOD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, MARY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, MARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENNINGS, RODNEY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SPRING, TX 77379		
Principal occupation / Job title (See Instructions) TELESALES PROFESSIONAL		Employer (See Instructions) CENTERPOINT ENERGY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, ANN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) TX STATE UNIVERSITY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, ANN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) TX STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2004/4629 Rpt: 2007/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, BENT	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code WELLINGTON, FL 33414		
8 Principal occupation / Job title (See Instructions) HORSE TRAINER		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, BENT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WELLINGTON, FL 33414		
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, BENT	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WELLINGTON, FL 33414		
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE	Amount of Contribution (\$) \$5.50
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2005/4629 Rpt: 2008/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$4.25
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$6.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$4.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2006/4629 Rpt: 2009/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, JANE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, RICHARD <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, ROBYN <hr/> Contributor address; City; State; Zip Code RANCHO PALOS VERDES, CA 90275	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INTERIOR DESIGNER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENSEN, VIRGINIA <hr/> Contributor address; City; State; Zip Code LOS OSOS, CA 93402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JENTSCH, VIRGINIA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2007/4629 Rpt: 2010/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JERNIGAN, RICHARD <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) VIDEO DIRECTOR		9 Employer (See Instructions) CAMBIUM LEARNING
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JERNIGAN, RICHARD <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VIDEO DIRECTOR		Employer (See Instructions) CAMBIUM LEARNING
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEROME, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEROME, GERALDINE <hr/> Contributor address; City; State; Zip Code LOVELAND, CO 80537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEROSLOW, RAYMOND <hr/> Contributor address; City; State; Zip Code ROBBINSVILLE, NC 28771	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2008/4629 Rpt: 2011/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2009/4629 Rpt: 2012/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEUDY, WIL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NEXT LEVEL URGENT CARE

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2010/4629 Rpt: 2013/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JEZEK, NANCY AND PAUL <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PET GROOMER		9 Employer (See Instructions) MYSELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIA, BENJAMIN <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) INSURANCE BUSINESS		Employer (See Instructions) SELF EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIA, YING <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MODEL RISK MANAGER		Employer (See Instructions) COMERICA BANK
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIANG, MING TAO <hr/> Contributor address; City; State; Zip Code WAUSAU, WI 54403	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) GINSENG FARMER		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIANG, MING TAO <hr/> Contributor address; City; State; Zip Code WAUSAU, WI 54403	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) GINSENG FARMER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2011/4629 Rpt: 2014/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIFI BALLOOL, HAITHAM	7 Amount of Contribution (\$) \$400.00
6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIFI BALLOOL, HAITHAM	Amount of Contribution (\$) \$400.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIGANTI, MARK	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GUNNISON, CO 81230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JILES, ANITA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAGO VISTA, TX 78645		
Principal occupation / Job title (See Instructions) COMMUNICATIONS		Employer (See Instructions) TEPSA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, CHARLES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90046		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAUSD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2012/4629 Rpt: 2015/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, CHARLES <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) LAUSD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, CHARLES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAUSD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, CHARLES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAUSD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, CHARLES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAUSD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, DEMETRIO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) TROPICANA PROPERTIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2013/4629 Rpt: 2016/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, DINA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78245	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SEL EMPLOYED		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, GABRIEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, JACQUELINE <hr/> Contributor address; City; State; Zip Code SOUTH GATE, CA 90280	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENTERTAINMENT EXECUTIVE		Employer (See Instructions) UNDISCLOSED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, JESSE <hr/> Contributor address; City; State; Zip Code PROVIDENCE VILLAGE, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DISTRIBUTION CENTER MANAGER		Employer (See Instructions) ALPHABRODER
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, JESSE <hr/> Contributor address; City; State; Zip Code PROVIDENCE VILLAGE, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DISTRIBUTION CENTER MANAGER		Employer (See Instructions) ALPHABRODER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2014/4629 Rpt: 2017/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, MARIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, MARIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENEZ, OMAR <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75253	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) MOBILITY AMBASSADOR		Employer (See Instructions) DART
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMENO, CAROL <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIMERSON, MICKEY <hr/> Contributor address; City; State; Zip Code SAN JACINTO, CA 92582	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JIWANI, AASIYA <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CUSTOMER SUCCESS MANAGER		9 Employer (See Instructions) GRAYLOG
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOBE, MARGARET <hr/> Contributor address; City; State; Zip Code BOULDER, OH 45241	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOBE, MARGARET <hr/> Contributor address; City; State; Zip Code BOULDER, OH 45241	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOE, EDWARD <hr/> Contributor address; City; State; Zip Code BAKERSFIELD, CA 93306-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOE, EDWARD <hr/> Contributor address; City; State; Zip Code BAKERSFIELD, CA 93306-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2016/4629 Rpt: 2019/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOELSON, LEAH <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75204	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CONTRACTOR/EDUCATION		9 Employer (See Instructions) LEXIA
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOELSON, LEAH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONTRACTOR/EDUCATION		Employer (See Instructions) LEXIA
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHANNESSEN, DAVID <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) HELP CENTER FOR LGBT HEALTH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHANOS, EVA <hr/> Contributor address; City; State; Zip Code HAIKU, HI 96708	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HAWAII DOE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHANSEN, ROBERTA <hr/> Contributor address; City; State; Zip Code BARTLESVILLE, OK 74003	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) PCA		Employer (See Instructions) HEALTHCARE INNOVATIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2017/4629 Rpt: 2020/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN, BETTE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN, BETTE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN, TELFRYN <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) GEOSCIENCE ENGINEERING
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, KATHY <hr/> Contributor address; City; State; Zip Code LITTLETON, CO 80125	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, KATHY <hr/> Contributor address; City; State; Zip Code LITTLETON, CO 80125	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2018/4629 Rpt: 2021/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, REBEKAH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78753	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CLINICAL MENTAL HEALTH COUNSELOR		9 Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, SHARON <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95818	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, SHARON <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95818	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, TONY <hr/> Contributor address; City; State; Zip Code HIDEAWAY, TX 75771	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, TONY <hr/> Contributor address; City; State; Zip Code HIDEAWAY, TX 75771	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2019/4629 Rpt: 2022/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, TONY <hr/> 6 Contributor address; City; State; Zip Code HIDEAWAY, TX 75771-5034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, TONY <hr/> Contributor address; City; State; Zip Code HIDEAWAY, TX 75771-5034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, TONY <hr/> Contributor address; City; State; Zip Code HIDEAWAY, TX 75771-5034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNS, TONY <hr/> Contributor address; City; State; Zip Code HIDEAWAY, TX 75771-5034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ALICIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628-9503	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2020/4629 Rpt: 2023/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANDREW <hr/> 6 Contributor address; City; State; Zip Code WESTCHESTER, IL 60154	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANGELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75233	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) KALKOMEY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77256	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) STATE OF TEXAS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77256	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) STATE OF TEXAS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77256	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2021/4629 Rpt: 2024/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> 6 Contributor address; City; State; Zip Code MESQUITE, TX 75149	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2022/4629 Rpt: 2025/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> 6 Contributor address; City; State; Zip Code MESQUITE, TX 75149	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNE <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ANNETTE <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$42.13
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ATLANTIS <hr/> Contributor address; City; State; Zip Code ROBSTOWN, TX 78380	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) A. JOHNSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2023/4629 Rpt: 2026/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BARRY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76133		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) BARRY JOHNSON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BARRY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76133		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BARRY JOHNSON
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BENITA	Amount of Contribution (\$) \$285.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BEVERLY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MORENO VALLEY, CA 92553		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BILL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2024/4629 Rpt: 2027/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BILL	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BLAINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FLOWERY BRANCH, GA 30542		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, BLAINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FLOWERY BRANCH, GA 30542		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CALVIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CAMERON	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MARIETTA, GA 30060		
Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		Employer (See Instructions) MILAN EYE CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2025/4629 Rpt: 2028/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CAROL <hr/> 6 Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CARRIE <hr/> Contributor address; City; State; Zip Code LONGWOOD, FL 32750	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CLAIRE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NONPROFIT EXECUTIVE DIRECTOR		Employer (See Instructions) DOYENNE INITIATIVE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CLAIRE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NONPROFIT EXECUTIVE DIRECTOR		Employer (See Instructions) DOYENNE INITIATIVE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CRYSTAL <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KILLEEN INDEPENDENT SCHOOL DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2026/4629 Rpt: 2029/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DANIEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78765	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DAVID <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DAYNA <hr/> Contributor address; City; State; Zip Code GIDDINGS, TX 78942	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LANDMAN		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DONALD <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DR SINSEY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) US POSTAL SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2027/4629 Rpt: 2030/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ERIC	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75219		
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) DALLAS ISD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75219		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) DALLAS ISD
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75219		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) DALLAS ISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GERALDYNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BELTON, TX 76513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131		
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) ARDMORE PEDS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2028/4629 Rpt: 2031/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131		
8 Principal occupation / Job title (See Instructions) NP		9 Employer (See Instructions) ARDMORE PEDS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PHILA, PA 19131		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) WOODBURY PEDIATRICS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131		
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) ARDMORE PEDS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131		
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) ARDMORE PEDS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PHILA, PA 19131		
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) WOODBURY PEDIATRICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2029/4629 Rpt: 2032/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131		
8 Principal occupation / Job title (See Instructions) NP		9 Employer (See Instructions) ARDMORE PEDS
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, GILDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19131		
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) ARDMORE PEDS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, HARRY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF HARRY JOHNSON
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JAMES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLS, TX 75218		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94124		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2030/4629 Rpt: 2033/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94124		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94124		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEANNETTE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94124		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEFFREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) QUALITY ENGINEER		Employer (See Instructions) FLEX
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JEFFREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) QUALITY ENGINEER		Employer (See Instructions) FLEX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2031/4629 Rpt: 2034/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) CANYON SNOW CONSULTING
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JODY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JODY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JODY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JODY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2032/4629 Rpt: 2035/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JODY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JOHNNIE <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JON <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RAYTHEON
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, JULIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CAMPAIGN		Employer (See Instructions) ACCOUNT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATE <hr/> Contributor address; City; State; Zip Code HASLET, TX 76052	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SUPPLIER DIVERSITY MANAGER		Employer (See Instructions) LOCKHEED MARTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2033/4629 Rpt: 2036/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATE <hr/> 6 Contributor address; City; State; Zip Code HASLET, TX 76052	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SUPPLIER DIVERSITY MANAGER		9 Employer (See Instructions) LOCKHEED MARTIN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATHLEEN <hr/> Contributor address; City; State; Zip Code CADIZ, KY 42211	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FAMILY SERVICES		Employer (See Instructions) GOODWIN F H
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATHLEEN <hr/> Contributor address; City; State; Zip Code CADIZ, KY 42211	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) FAMILY SERVICES		Employer (See Instructions) GOODWIN F H
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATRINA <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATRINA <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2034/4629 Rpt: 2037/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KIRA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KIRA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LEON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CENTEX TECHNOLOGIES
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LESLY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GRANT RYDER		Employer (See Instructions) HOUSTON FOOD BANK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LUCY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2035/4629 Rpt: 2038/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LUCY <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		9 Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LUCY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LUCY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LYNN <hr/> Contributor address; City; State; Zip Code MANSFIELD, CT 06268	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, LYNN B <hr/> Contributor address; City; State; Zip Code WINSTONSALEM, NC 27106	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2036/4629 Rpt: 2039/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MARCIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77021	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MARCIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MARCIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MERVIL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WORKFORCE SOLUTIONS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MERVIL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WORKFORCE SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2037/4629 Rpt: 2040/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) LOBBYIST		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MICHAEL <hr/> Contributor address; City; State; Zip Code PURCELLVILLE, VA 20134	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, NANCY <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, NANCY <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2038/4629 Rpt: 2041/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, NANCY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAMELA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ANTHROPOLOGIST		Employer (See Instructions) SELF-EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, PAMELA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, RANDY <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, RAY <hr/> Contributor address; City; State; Zip Code WEST DES MOINES, IA 50265	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JOHNSON LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2039/4629 Rpt: 2042/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, REGINA <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) BUSINESS DEVELOPMENT		9 Employer (See Instructions) AUSTRALIAN CONSULATE-GENERAL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, RON <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, ROSS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SAN ANTONIO IND. SCHOOL DISTRICT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SAM <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JOHNSON FRIEDMAN LAW GROUP PLLC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SHAKITA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ED		Employer (See Instructions) UNITED WAY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2040/4629 Rpt: 2043/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SHARON <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		9 Employer (See Instructions) JOHNSONGROVE LLC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SHARON <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) JOHNSONGROVELLC
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SHARON <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) JOHNSONGROVE LLC
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SHARON <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) JOHNSONGROVELLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SHELLY <hr/> Contributor address; City; State; Zip Code ARLINGTON, WA 98223-1213	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2041/4629 Rpt: 2044/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, STARLA <hr/> 6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		9 Employer (See Instructions) LEWISVILLE ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SUSAN <hr/> Contributor address; City; State; Zip Code MONTCLAIR, NJ 07043	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SUSAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, SUSAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, VANESSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77045	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON - CLEAR LAKE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2042/4629 Rpt: 2045/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, VICTORIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LA MESA, CA 91941		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, VICTORIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LA MESA, CA 91941		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, WILLIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DALLAS, TX 75232-2450		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON-OVERALL, LINDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON-OVERALL, LINDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2043/4629 Rpt: 2046/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAWN <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) CHRISTUS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, DAWN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CHRISTUS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, JILL <hr/> Contributor address; City; State; Zip Code ELGIN, IL 60123	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, LEANNE <hr/> Contributor address; City; State; Zip Code RENO, TX 75462	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER CARE		Employer (See Instructions) LETS DABBLE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, MARK <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2044/4629 Rpt: 2047/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, MARK <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75033	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, MARK <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, MAY <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94502	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSTON, MAY <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94502	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHST, CHEVONNE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2045/4629 Rpt: 2048/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHST, CHEVONNE <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLIN, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SMITH JOLIN PLLC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLLEY, P.D. <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602-5674	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLLEY, P.D. <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602-5674	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLLEY, SUSAN <hr/> Contributor address; City; State; Zip Code DELRAN, NJ 08075	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2046/4629 Rpt: 2049/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLLY, MONICA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONAS, MARTHA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONAS, MARTHA	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONAS, MARTHA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ADAH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WIMBERLEY, TX 78676		
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2047/4629 Rpt: 2050/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ADAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CONSULTANT / LOBBYIST		9 Employer (See Instructions) CAPITOL JONES, LLC
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ALLYSON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INVESTIGATOR		Employer (See Instructions) TEXAS MUTUAL INSUR CO
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ALLYSON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INVESTIGATOR		Employer (See Instructions) TEXAS MUTUAL INSUR CO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ANDREW <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SAWICKI LAW
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ANDY <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SAWICKI LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2048/4629 Rpt: 2051/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ANGELA <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ANGELA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, APRIL L. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77083	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) AL JONES CONTRACTING CONSULTING SERVICES, LLC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, APRIL L. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77083	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) AL JONES CONTRACTING CONSULTING SERVICES, LLC.
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ARLIETA <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79606	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ABILENE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2049/4629 Rpt: 2052/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ARLIETA <hr/> 6 Contributor address; City; State; Zip Code ABILENE, TX 79606	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ABILENE ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BARRY <hr/> Contributor address; City; State; Zip Code WAKEFIELD, MA 01880	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$40.48
Principal occupation / Job title (See Instructions) CREATIVE DIRECTOR		Employer (See Instructions) ZENIMAX MEDIA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BLAKE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$108.88
Principal occupation / Job title (See Instructions) FA		Employer (See Instructions) MORGAN STANLEY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BLAKE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$108.88
Principal occupation / Job title (See Instructions) FA		Employer (See Instructions) MORGAN STANLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2050/4629 Rpt: 2053/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78757		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) APTS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) APTS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) APTS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) APTS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) APTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2051/4629 Rpt: 2054/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) APTS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BOBBI KAYE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, BRUCE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CARL <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CARL <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2052/4629 Rpt: 2055/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CARL <hr/> 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CARL <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CARL <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CARL <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CAROLINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) PEARSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2053/4629 Rpt: 2056/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77033	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CAROLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77033	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CAROLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77033	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CASSANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77047	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNITY ORGANIZER		Employer (See Instructions) PICO INTERNATIONAL
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CASSANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77047	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNITY ORGANIZER		Employer (See Instructions) PICO INTERNATIONAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2054/4629 Rpt: 2057/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CHARLEEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CHARLENE <hr/> Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46205-3685	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) CHARLENE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CHARLOTTE <hr/> Contributor address; City; State; Zip Code ELMHURST, IL 60126	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, CHARLOTTE <hr/> Contributor address; City; State; Zip Code ELMHURST, IL 60126	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DALLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ELITE CHANGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2055/4629 Rpt: 2058/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DARRELL <hr/> 6 Contributor address; City; State; Zip Code PORT TOWNSEND, WA 98368	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DAVID <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DEREK <hr/> Contributor address; City; State; Zip Code RENTON, WA 98058	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DEREK <hr/> Contributor address; City; State; Zip Code RENTON, WA 98058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DOCUMENT PROCESSOR		Employer (See Instructions) SPECTRUM INFORMATION SERVICES NW, INC.
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DEREK <hr/> Contributor address; City; State; Zip Code RENTON, WA 98058	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2056/4629 Rpt: 2059/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DEREK <hr/> 6 Contributor address; City; State; Zip Code RENTON, WA 98058	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DOCUMENT PROCESSOR		9 Employer (See Instructions) SPECTRUM INFORMATION SERVICES NW, INC.
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DEREK <hr/> Contributor address; City; State; Zip Code RENTON, WA 98058	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, DIANE <hr/> Contributor address; City; State; Zip Code DEERFIELD BEACH, FL 33442	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ELLEN <hr/> Contributor address; City; State; Zip Code PARADISE, TX 76073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ELLEN <hr/> Contributor address; City; State; Zip Code PARADISE, TX 76073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2057/4629 Rpt: 2060/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ELLEN <hr/> 6 Contributor address; City; State; Zip Code PARADISE, TX 76073	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, FRANKLIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77251	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) GREENBERG TRAURIG, LLP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GABBY <hr/> Contributor address; City; State; Zip Code CRESTVIEW, FL 32539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) OKALOOSA COUNTY SCHOOL DISTRICT
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GABBY <hr/> Contributor address; City; State; Zip Code CRESTVIEW, FL 32539	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) OKALOOSA COUNTY SCHOOL DISTRICT
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARRY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) DFER TX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2058/4629 Rpt: 2061/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code ESCONDIDO, CA 92027		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2059/4629 Rpt: 2062/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GINNY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, HAZEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JAMES <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JEFFREY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90067	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JEFFREY <hr/> Contributor address; City; State; Zip Code COLUMBUS, IN 47203	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2060/4629 Rpt: 2063/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code HENDERSON, NV 89011	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JENNIFER <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JENNIFER <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JENNIFER <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JENNIFER <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2061/4629 Rpt: 2064/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JOLANDA	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77004		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JUANITA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) FAMILY SERVICE		Employer (See Instructions) HEAD START
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JUANITA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) FAMILY SERVICE		Employer (See Instructions) HEAD START
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, JULLIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SPRING, TX 77391		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, KAREN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TERRELL, TX 75160		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2062/4629 Rpt: 2065/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, KAREN <hr/> 6 Contributor address; City; State; Zip Code TERRELL, TX 75160	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, KARON <hr/> Contributor address; City; State; Zip Code POINT, TX 75472	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, KATHY <hr/> Contributor address; City; State; Zip Code ENCINO, CA 91436-3625	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, KIYUNDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) OAK CLIFF CHAMBER OF COMMERCE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> Contributor address; City; State; Zip Code PORTAGE, WI 53901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2063/4629 Rpt: 2066/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> 6 Contributor address; City; State; Zip Code PORTAGE, WI 53901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> Contributor address; City; State; Zip Code PORTAGE, WI 53901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> Contributor address; City; State; Zip Code PORTAGE, WI 53901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> Contributor address; City; State; Zip Code PORTAGE, WI 53901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> Contributor address; City; State; Zip Code PORTAGE, WI 53901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2064/4629 Rpt: 2067/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LARRY <hr/> 6 Contributor address; City; State; Zip Code PORTAGE, WI 53901	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LAURA <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) HOMEPLUS REALTY GROUP
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LAURA <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) HOMEPLUS REALTY GROUP
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LAURA <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) HOMEPLUS REALTY GROUP
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LAURA <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) HOMEPLUS REALTY GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2065/4629 Rpt: 2068/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LAURA <hr/> 6 Contributor address; City; State; Zip Code COLDSRING, TX 77331	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) HOMEPLUS REALTY GROUP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2066/4629 Rpt: 2069/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LEONARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2067/4629 Rpt: 2070/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LISA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		9 Employer (See Instructions) TEXAS SENATE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LISE <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80226	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LISE <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LYNNE <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) INTERIOR DESIGNER		Employer (See Instructions) LYNNE T JONES INTERIOR DESIGN
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LYNNE <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) INTERIOR DESIGNER		Employer (See Instructions) LYNNE T JONES INTERIOR DESIGN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2068/4629 Rpt: 2071/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MARGARET <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MARGARET <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MARGARET <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MARGARET <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MARGARET <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2069/4629 Rpt: 2072/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELISSA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELISSA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELISSA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELISSA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MELISSA	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2070/4629 Rpt: 2073/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MINA <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11215	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) OLD STONE HOUSE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MINA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) OLD STONE HOUSE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MOIRA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, RAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2071/4629 Rpt: 2074/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, ROBERT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SCOTT <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OPERATIONS DIRECTOR		Employer (See Instructions) HOUSTON AUDUBON SOCIETY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SCOTT <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPERATIONS DIRECTOR		Employer (See Instructions) HOUSTON AUDUBON SOCIETY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SCOTT <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPERATIONS DIRECTOR		Employer (See Instructions) HOUSTON AUDUBON SOCIETY
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SCOTT <hr/> Contributor address; City; State; Zip Code ANGEL FIRE, NM 87710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2072/4629 Rpt: 2075/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SCOTT <hr/> 6 Contributor address; City; State; Zip Code ANGEL FIRE, NM 87710	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SHAWN <hr/> Contributor address; City; State; Zip Code MATTHEWS, NC 28104-6753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GRID MANAGEMENT		Employer (See Instructions) DUKE ENERGY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, SHERI <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, VALERIE <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) ORACLE AMERICA, INC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, VENTON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75215	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) SBPAN

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2073/4629 Rpt: 2076/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, VENTON	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code LANCASTER, TX 75134		
8 Principal occupation / Job title (See Instructions) TRUCK DRIVER		9 Employer (See Instructions) JB HUNT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, VINETTA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MITCHELLVILLE, MD 20721		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, WILLIAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FALLS CHURCH, VA 22046		
Principal occupation / Job title (See Instructions) GOVERNMENT EMPLOYEE		Employer (See Instructions) FDIC
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES JR, HUBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PEARLAND, TX 77581		
Principal occupation / Job title (See Instructions) PRECISION GRAPHIX GROUP		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES JR, HUBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PEARLAND, TX 77581		
Principal occupation / Job title (See Instructions) PRECISION GRAPHIX GROUP		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2074/4629 Rpt: 2077/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES JR, THOMAS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77081	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES-CUTLER, ANN <hr/> Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33317	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES-SIMMER, MICKIE <hr/> Contributor address; City; State; Zip Code COCOA, FL 32927	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES-SIMMER, MICKIE <hr/> Contributor address; City; State; Zip Code COCOA, FL 32927	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES-WEBB, EDNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77083	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2075/4629 Rpt: 2078/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOOS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code JACKSONVILLE, FL 32207	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE ATTORNEY		9 Employer (See Instructions) DUSS, KENNEY, SAFER, HAMPTON & JOOS PA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOOST, DAVID <hr/> Contributor address; City; State; Zip Code WHARTON, TX 77488	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDAN, JANET <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDAN, PATRICIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDAN, PATRICIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2076/4629 Rpt: 2079/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDAN, PERRY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDAN, PERRY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORDEN, JANICE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORGENSEN, JEFF <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MEDICINE		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORNS, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2077/4629 Rpt: 2080/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPH, MARGARET	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPH, MARGARET	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPH, PINNA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85250		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPHS, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) RETIRED TEACHER/ADJUNCT FACULTY		Employer (See Instructions) BAYLOR
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPHS, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) RETIRED TEACHER/ADJUNCT FACULTY		Employer (See Instructions) BAYLOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2078/4629 Rpt: 2081/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPHS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED TEACHER/ADJUNCT FACULTY		9 Employer (See Instructions) BAYLOR
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSH, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750-1422	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR OF FINANCE		Employer (See Instructions) SEIU
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSH, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750-1422	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF FINANCE		Employer (See Instructions) SEIU EDUCATION AND SUPPORT FUND
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSH, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750-1422	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR OF FINANCE		Employer (See Instructions) SEIU
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSHI, VISHWANATH <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TEXAS INSTRUMENTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2079/4629 Rpt: 2082/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSIMOVICH, LOIS <hr/> 6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02238	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NONPROFIT FUNDRAISING		9 Employer (See Instructions) MAPS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSIMOVICH, LOIS <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONPROFIT FUNDRAISING		Employer (See Instructions) MAPS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSIMOVICH, LOIS <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NONPROFIT FUNDRAISING		Employer (See Instructions) MAPS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSIMOVICH, LOIS <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FUNDRAISING		Employer (See Instructions) MAPS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOURNEY, ELIZABETH <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL DIETITIAN		Employer (See Instructions) CHILDREN'S HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2080/4629 Rpt: 2083/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOURNEY, ELIZABETH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
8 Principal occupation / Job title (See Instructions) CLINICAL DIETITIAN		9 Employer (See Instructions) CHILDREN'S HEALTH
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOWELL, MARLENE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code JACKSONVILLE, TX 75766		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOWELL, MARLENE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code JACKSONVILLE, TX 75766		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOWELL, MARLENE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code JACKSONVILLE, TX 75766		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOWERS, HELLEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2081/4629 Rpt: 2084/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOWERS, HELLEN <hr/> 6 Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOYCE, GREG <hr/> Contributor address; City; State; Zip Code SOUTH BOSTON, MA 02127	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) AKAMAI TECHNOLOGIES
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOYCE, GREG <hr/> Contributor address; City; State; Zip Code SOUTH BOSTON, MA 02127	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) AKAMAI TECHNOLOGIES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOYCE, TOM <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55403	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOYCE, TOM <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55403	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2082/4629 Rpt: 2085/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOYNER, FRANCIS <hr/> 6 Contributor address; City; State; Zip Code CHARLESTOWN, MA 02129	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUAREZ, ANA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUAREZ, ANA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUAREZ, RITA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90057	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) GGA LLP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUAREZ, VERONICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2083/4629 Rpt: 2086/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUBIN, JEAN <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75069	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUDAH, COLBY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97220	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BOUTIQUE AMPLIFIER MANUFACTURE		Employer (See Instructions) BRIDGE CITY SOUND
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUDD, DAVID <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75604	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) PRESBYTERIAN CHURCH
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA <hr/> Contributor address; City; State; Zip Code MEQUON, WI 53092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA <hr/> Contributor address; City; State; Zip Code MEQUON, WI 53092	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2084/4629 Rpt: 2087/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code MEQUON, WI 53092		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2085/4629 Rpt: 2088/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code MEQUON, WI 53092		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JULIUS, SANDRA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MEQUON, WI 53092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUMP, JENNIFER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2086/4629 Rpt: 2089/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUMPER, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) TTUHSC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUNIUS, NATHAN <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70124	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) LINFIELD, HUNTER & JUNIUS, INC.
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUNIUS, NATHAN <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70124	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) LINFIELD, HUNTER & JUNIUS, INC.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUR, FRANK <hr/> Contributor address; City; State; Zip Code MILPITAS, CA 95035	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUR, FRANK <hr/> Contributor address; City; State; Zip Code MILPITAS, CA 95035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2087/4629 Rpt: 2090/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURCOI, CHERYL <hr/> 6 Contributor address; City; State; Zip Code STILLWATER, MN 55082	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) DHS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURESTOVSKY, ROSANN <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURESTOVSKY, ROSANN <hr/> Contributor address; City; State; Zip Code GOLDEN, CO 80403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURGENS, ALAYNE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURGENS, GAY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2088/4629 Rpt: 2091/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURGENS, GAY <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75036	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURGENS, GAY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURGENS, GAY <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JURIK, NICHOLAS <hr/> Contributor address; City; State; Zip Code NORMAN, OK 73071	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ART DIRECTOR		Employer (See Instructions) THE CHICKASAW NATION
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUST, THOMAS <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610-2199	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LIPPINCOTT LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2089/4629 Rpt: 2092/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUSTESEN, KRIS <hr/> 6 Contributor address; City; State; Zip Code COTTONWOOD HTS, UT 84121	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) HEALTH CARE		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K. CUSICK, ALENORE <hr/> Contributor address; City; State; Zip Code GLENMONT, NY 12077-3617	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KABIR, NAVEEN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) CONSTANGY BROOKS SMITH & PROPHETE LLP
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADEN, LAUREN <hr/> Contributor address; City; State; Zip Code RIVERWOODS, IL 60015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADEN, LAUREN <hr/> Contributor address; City; State; Zip Code RIVERWOODS, IL 60015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2090/4629 Rpt: 2093/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADERKA, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code GRANGER, TX 76530	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) HUMAN CAPITAL MGMT		9 Employer (See Instructions) UT AUSTIN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADONSKY, WILLIAM <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP, BUSINESS OPS		Employer (See Instructions) ZIXCORP
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADONSKY, WILLIAM <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP, BUSINESS OPS		Employer (See Instructions) ZIXCORP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAEMMERLEN, JOHN <hr/> Contributor address; City; State; Zip Code FAIRPORT, NY 14450	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAGAN, JEREMY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90049	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) FILMMAKER/PROFESSOR		Employer (See Instructions) OOC/USC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2091/4629 Rpt: 2094/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAGAN, JEREMY	7 Amount of Contribution (\$) \$36.00
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90049		
8 Principal occupation / Job title (See Instructions) FILMMAKER/PROFESSOR		9 Employer (See Instructions) OOC/USC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHLE, JUDITH	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code FAIRFIELD, CA 94533-5146		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHLER, GAYLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code TAYLOR, TX 76574		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) DELL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, DAVID	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75209		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, DAVID	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75209		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2092/4629 Rpt: 2095/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code CORVALLIS, OR 97333		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CORVALLIS, OR 97333		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CORVALLIS, OR 97333		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CORVALLIS, OR 97333		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CORVALLIS, OR 97333		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2093/4629 Rpt: 2096/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE <hr/> 6 Contributor address; City; State; Zip Code CORVALLIS, OR 97333	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, ELAINE <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97333	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2094/4629 Rpt: 2097/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, JAMES <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) HOSPITAL INTERNISTS OF TEXAS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, JENETTE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10030	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PRODUCER		Employer (See Instructions) A PENNY FOR YOUR THOUGHTS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, SUSAN AND ED <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401-3706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, SYLVIA <hr/> Contributor address; City; State; Zip Code SAN MATEO, CA 94402	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, W BARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2095/4629 Rpt: 2098/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHN, W BARRY	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77024		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2096/4629 Rpt: 2099/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHNERT, VONNIE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BURNSVILLE, MN 55306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHR, FRANK	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SOUTH CHATHAM, MA 02659		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2097/4629 Rpt: 2100/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAI, JUDITH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAIN, JAMES	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WOOLWICH TWP, NJ 08085		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) HEALTHCARE COMMONS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAIN, ROBERT	Amount of Contribution (\$) \$100.25
Contributor address; City; State; Zip Code DALLAS, TX 75208		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAISER, WENDY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BRONX, NY 10471		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAJA, CHANDRA SEKHAR	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code IRVING, TX 75038		
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) UNITED IT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2098/4629 Rpt: 2101/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALB, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) TELECOM ENGINEER		9 Employer (See Instructions) VERIZON
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALB, MATTHEW <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TELECOM ENGINEER		Employer (See Instructions) VERIZON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALFF, KARIN <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020-4200	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALFF, KARIN <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98020-4200	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2099/4629 Rpt: 2102/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code OAKLAND, CA 94612		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OAKLAND, CA 94612		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OAKLAND, CA 94612		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code OAKLAND, CA 94612		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code OAKLAND, CA 94612		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2100/4629 Rpt: 2103/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94612	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2101/4629 Rpt: 2104/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94612	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLENBERG, PAULA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2102/4629 Rpt: 2105/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KALLUS, DAVID	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMAL, MURTAZA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code COLORADO, CO 81001		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) BLUESTAQ
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMAL, TAUSIF	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75070		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMATH, NEVIN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMATH, NEVIN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) RESISTTRUMP NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2103/4629 Rpt: 2106/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAMER, TERESA <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 91423	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) DESIGNER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANA, JANE <hr/> Contributor address; City; State; Zip Code QUEENSBURY, NY 12804	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANA, JANE <hr/> Contributor address; City; State; Zip Code QUEENSBURY, NY 12804	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANAN, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) JAMES KANAN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANE, DAVID <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95616	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ADMAIL WEST, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2104/4629 Rpt: 2107/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANE, ITA	7 Amount of Contribution (\$) \$2.86
6 Contributor address; City; State; Zip Code BOSTON, MA 02127		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) CONFORMIS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANE, ITA	Amount of Contribution (\$) \$2.86
Contributor address; City; State; Zip Code BOSTON, MA 02127		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CONFORMIS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANE, MATTHEW	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code SALEM, MA 01970		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SPOTIFY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANEKO, ANN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANEMOTO, MIKE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code HILO, HI 96720-6753		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) POWER ENGINEERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2105/4629 Rpt: 2108/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANEMOTO, MIKE <hr/> 6 Contributor address; City; State; Zip Code HILO, HI 96720-6753	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) POWER ENGINEERS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANER, JOSEPH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) GLOBE LIFE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANER, JOSEPH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) GLOBE LIFE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KANTNER, MILDRED <hr/> Contributor address; City; State; Zip Code NORTHRIDGE, CA 91324	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAO, VICTOR <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AMERICAN INTERNATIONAL GROUP, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2106/4629 Rpt: 2109/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPLAN, BELLA	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPLAN, LEON	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ABCO, INC.
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPLAN, MAYA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPLAN, MAYA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, ANIL	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) NONPROFIT		Employer (See Instructions) A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2107/4629 Rpt: 2110/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) ROSE INTERNATIONAL
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ROSE INTERNATIONAL
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ROSE INTERNATIONAL
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ROSE INTERNATIONAL
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ROSE INTERNATIONAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2108/4629 Rpt: 2111/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) ROSE INTERNATIONAL
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPOOR, POONAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) ROSE INTERNATIONAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPPES, JANET <hr/> Contributor address; City; State; Zip Code CHARLESTON, IL 61920	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPPES, MARY <hr/> Contributor address; City; State; Zip Code MABANK, TX 75156	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSED VOCATIONAL NURSE		Employer (See Instructions) PEDIATRIC HOME HEALTHCARE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPPES, MARY <hr/> Contributor address; City; State; Zip Code MABANK, TX 75156	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSED VOCATIONAL NURSE		Employer (See Instructions) PEDIATRIC HOME HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2109/4629 Rpt: 2112/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARACHIWALA, B Z <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARACHIWALA, B Z <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARACHIWALA, B Z <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARAGOSIAN, MICHAEL <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) MKPE CONSULTING LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARAS, ELLIETTE <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2110/4629 Rpt: 2113/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARAS, ELLIETTE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code TOMBALL, TX 77375		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARASU, SINAN	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code SEATTLE, WA 98115		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAREMPUDI, SAHITI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PROGRAM COORDINATOR		Employer (See Instructions) CITY OF AUSTIN
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAREMPUDI, SAHITI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PROGRAM COORDINATOR		Employer (See Instructions) CITY OF AUSTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAREMPUDI, SAHITI	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) PROGRAM COORDINATOR		Employer (See Instructions) CITY OF AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2111/4629 Rpt: 2114/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAREMPUDI, SAHITI <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78702	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) PROGRAM COORDINATOR		9 Employer (See Instructions) CITY OF AUSTIN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAREN, KAREN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARIOTIS, CAROL <hr/> Contributor address; City; State; Zip Code LIBERTY, MO 64068	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARTIST/CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARIOTIS, CAROL <hr/> Contributor address; City; State; Zip Code LIBERTY, MO 64068	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARTIST/CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARJEKER, ALEX <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2112/4629 Rpt: 2115/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARJEKER, SHAUKAT <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093-4510	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) PATENT ATTORNEY		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARLIN, CHRIS <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARLIN, CHRIS <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARLIN, CHRIS <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARLIN, CHRIS <hr/> Contributor address; City; State; Zip Code HOOD RIVER, OR 97031	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2113/4629 Rpt: 2116/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARMALLY, SAMEENA <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$67.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARNEY, ANITA <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARNY, LORI <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARNY, LORI <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARNY, LORI <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2114/4629 Rpt: 2117/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARNY, LORI <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARNY, LORI <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARP, MARSHA <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) JOHNS HOPKINS UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARPAS, LESLIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARPMAN, EDEN <hr/> Contributor address; City; State; Zip Code AURORA, CO 80013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WAITER		Employer (See Instructions) DEL FRISCOS DOUBLE EAGLE STEAKHOUSE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2115/4629 Rpt: 2118/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARPOOK, JAMES <hr/> 6 Contributor address; City; State; Zip Code BALTIMORE, MD 21230	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PARTNER		9 Employer (See Instructions) CHARTIS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARR, GEORGE <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GENERAL ELECTRIC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARSAN, DAMLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIFIED WOMENS HEALTHCARE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARSAN, DAMLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIFIED WOMENS HEALTHCARE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARSAN, DAMLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIFIED WOMENS HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2116/4629 Rpt: 2119/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASHANI, A	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77225		
8 Principal occupation / Job title (See Instructions) CONTRACTOR/CONSTRUCTION MANAGEMENT		9 Employer (See Instructions) HORIZON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASHANI, A	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77225		
Principal occupation / Job title (See Instructions) CONTRACTOR/CONSTRUCTION MANAGEMENT		Employer (See Instructions) HORIZON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASPARIK-ALEXANDER, ROSALIND	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASPER, BILLIE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code TERRELL, TX 75160		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) FLOWER BASKET
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASPER, BILLIE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code TERRELL, TX 75160		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) FLOWER BASKET

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2117/4629 Rpt: 2120/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASTL, KRISTINA N.	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75204		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) KASTL LAW, P.C.
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASTL, KRISTINA N.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KASTL LAW, P.C.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASTL, KRISTINA N.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KASTL LAW, P.C.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASTL, KRISTINA N.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KASTL LAW, P.C.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KASTL, KRISTINA N.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KASTL LAW, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2118/4629 Rpt: 2121/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KATSH-WILLIAMS, HALLEY <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11201	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KATZ, MERYL <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) IMPORT/WHOLESALE		Employer (See Instructions) PANGAEA TRADING COMPANY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KATZ, RONALD <hr/> Contributor address; City; State; Zip Code SAINT HELENA, CA 94574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFFMAN, ALBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) ST. MARYS UNIVERSITY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFFMAN, J <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO / CTO		Employer (See Instructions) J KAUFFMAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2119/4629 Rpt: 2122/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMAN, ALLAN <hr/> 6 Contributor address; City; State; Zip Code TEANECK, NJ 07666	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ACTUARY		9 Employer (See Instructions) FTI CONSULTING
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMAN, ALLAN <hr/> Contributor address; City; State; Zip Code TEANECK, NJ 07666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) FTI CONSULTING
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMAN, JEFFREY <hr/> Contributor address; City; State; Zip Code BATTLE GROUND, WA 98604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMAN, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMAN, LINDA <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2120/4629 Rpt: 2123/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMAN, LINDA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code LEXINGTON, MA 02421		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMANN, JEFFREY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAURA, JANA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAVANAUGH, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PRYOR, OK 74361		
Principal occupation / Job title (See Instructions) PROGRAMMING		Employer (See Instructions) FIDELITY INFORMATION SERVICES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAVANAUGH, MICHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PRYOR, OK 74361		
Principal occupation / Job title (See Instructions) PROGRAMMING		Employer (See Instructions) FIDELITY INFORMATION SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2121/4629 Rpt: 2124/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAVANAUGH, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code PRYOR, OK 74361	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAMMING		9 Employer (See Instructions) FIDELITY INFORMATION SERVICES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAVENY, JILL <hr/> Contributor address; City; State; Zip Code LOVELAND, CO 80538	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAWAI, MASAMI <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FILMMAKER/EDUCATOR		Employer (See Instructions) UNIVERSITY OF OREGON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAY, CHRIS <hr/> Contributor address; City; State; Zip Code SANJOSE, CA 95118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) USD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAY, CHRIS <hr/> Contributor address; City; State; Zip Code SANJOSE, CA 95118	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) USD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2122/4629 Rpt: 2125/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAYA, GULTEKIN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) HARMONY PUBLIC SCHOOLS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAYS, LISA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SMU
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAYS, LISA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SMU
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEAN, BARBARA <hr/> Contributor address; City; State; Zip Code MILTON, MA 02186	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEARNEY, MICHAEL <hr/> Contributor address; City; State; Zip Code COHASSET, MA 02025	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2123/4629 Rpt: 2126/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEARNEY, MICHAEL J <hr/> 6 Contributor address; City; State; Zip Code COHASSET, MA 02025	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEARNEY, MICHAEL J <hr/> Contributor address; City; State; Zip Code COHASSET, MA 02025	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEARNS, DIANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGER		Employer (See Instructions) DIRECTV
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEATHLEY, SARAH <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEATHLEY, SARAH <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEATING, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEATING, HEATHER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) EVENT RENTAL		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEGAN, HEATHER <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LONE STAR LEGAL AID
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEGAN, HEATHER <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LONE STAR LEGAL AID
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEGAN, HEATHER <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LONE STAR LEGAL AID

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2125/4629 Rpt: 2128/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEHN, BENJAMIN <hr/> 6 Contributor address; City; State; Zip Code HOLLISTON, MA 01746	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CPCS		9 Employer (See Instructions) LAWYER
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEHN, SUZANNE <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENER, AMIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INTERIOR DESIGNER		Employer (See Instructions) GENSLER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY, CAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY, CAROL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY, CAROL	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY, CAROL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY, KARLA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92122		
Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		Employer (See Instructions) RESOURCE CONSULTING GROUP
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY-KENNICUTT, WENDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENEY-KENNICUTT, WENDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2127/4629 Rpt: 2130/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEPER, PAUL	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78705		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEPING, VIRGINIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WOODLAND, CA 95696		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEES, DANE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) IRVING ISD
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEES, DANE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) IRVING ISD
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEVER, TOM	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2128/4629 Rpt: 2131/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEVER, TOM	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEHLENBACH, KATIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEHLENBACH, KATIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEHLENBACH, KATIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEHR, MARILYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49505		
Principal occupation / Job title (See Instructions) FUNDRAISING		Employer (See Instructions) FAMILY FUTURES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2129/4629 Rpt: 2132/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIGER, DARR <hr/> 6 Contributor address; City; State; Zip Code MIAMI, FL 33131	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PILOT		9 Employer (See Instructions) AMERICAN AIRLINES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIL-GRAY, LYNELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VINTAGE DEALER		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIM, LOIS <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIMIG, MEGAN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) C.E. BORMAN & ASSOCIATES
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIMIG, MEGAN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77808	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) C.E. BORMAN & ASSOCIATES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2130/4629 Rpt: 2133/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIPERT, LISA <hr/> 6 Contributor address; City; State; Zip Code WILMETTE, IL 60091	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LITIGATION ASSISTANT		9 Employer (See Instructions) LAW OFFICES OF R.F. WITTMAYER
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEIPERT, LISA <hr/> Contributor address; City; State; Zip Code WILMETTE, IL 60091	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LITIGATION ASSISTANT		Employer (See Instructions) LAW OFFICES OF R.F. WITTMAYER
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEISER, ANGELA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TRAINING ADMINISTRATOR		Employer (See Instructions) CITY OF CARROLLTON
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEISER, ANGELA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TRAINING ADMINISTRATOR		Employer (See Instructions) CITY OF CARROLLTON
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEISER, JOAN <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MGMT & PROG ANALYST		Employer (See Instructions) FEDERAL GOVT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2131/4629 Rpt: 2134/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELL, WILLIAM	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code EL PASO, TX 79912		
8 Principal occupation / Job title (See Instructions) VP		9 Employer (See Instructions) FMM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLAWAY, JAIME	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) LPC (COUNSELOR)		Employer (See Instructions) SELF-EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLAWAY, JAIME	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) LPC (COUNSELOR)		Employer (See Instructions) SELF-EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEHER, CELLIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SPRING, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEHER, CELLIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SPRING, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2132/4629 Rpt: 2135/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLER, KATIE <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92038	7 Amount of Contribution (\$) \$1,900.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLER, KELLY <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80235	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLER, MARY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94112	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLER, RONI <hr/> Contributor address; City; State; Zip Code NEWBURY PARK, CA 91320	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLER, SHARA <hr/> Contributor address; City; State; Zip Code BUELLTON, CA 93427	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2133/4629 Rpt: 2136/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLERMAN, SCOTT	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ARLINGTON, TX 76012		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLERMAN, SCOTT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76012		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, ADRIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORT ORANGE, FL 32127		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, ADRIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORT ORANGE, FL 32127		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, ADRIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORT ORANGE, FL 32127		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2134/4629 Rpt: 2137/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, BARBARA E	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code BASTROP, TX 78602		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NORETIREDNE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, BIRDIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) COMMUNITY LIAISON		Employer (See Instructions) BORRIS MILES
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, BIRDIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) COMMUNITY LIAISON		Employer (See Instructions) BORRIS MILES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, CHRISTIE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CARMEL VALLEY, CA 93924		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, JEANETTE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FRISCO, TX 75035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, KAREN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78736	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, STARLA <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79124	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AMARILLO ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLNER, LINDA <hr/> Contributor address; City; State; Zip Code WOODBIDGE, VA 22193	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, BILL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, BILL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) GAP TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, BILLY <hr/> 6 Contributor address; City; State; Zip Code SOUTH HOUSTON, TX 77587	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, CHARI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OFFICE OF THE TRAVIS COUNTY DISTRICT ATTORNEY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, CHARI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OFFICE OF THE TRAVIS COUNTY DISTRICT ATTORNEY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, EDNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, EDNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2137/4629 Rpt: 2140/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, GORDON <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, CA 76116-8236	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) COMPUTER ANALYST		9 Employer (See Instructions) EIP110, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JANICE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JANICE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JANICE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JOHN <hr/> Contributor address; City; State; Zip Code AVON, CT 06001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JOHN <hr/> 6 Contributor address; City; State; Zip Code AVON, CT 06001	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, KEVIN <hr/> Contributor address; City; State; Zip Code CUMBERLAND, MD 21502	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, KEVIN <hr/> Contributor address; City; State; Zip Code CUMBERLAND, MD 21502	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, LISA <hr/> Contributor address; City; State; Zip Code FULSHEAR, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) UT MD ANDERSON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, MICHAEL <hr/> Contributor address; City; State; Zip Code ORINDA, CA 94563	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code ORINDA, CA 94563	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, MICHAEL <hr/> Contributor address; City; State; Zip Code ORINDA, CA 94563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, OSCAR <hr/> Contributor address; City; State; Zip Code MASON CITY, IA 50401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, REBECCA <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87120	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) COORDINATOR		Employer (See Instructions) PHS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELTER, DONNA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) VWCA

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELTER, DONNA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code VICTORIA, TX 77904		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) VWCA
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELTER, DONNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code VICTORIA, TX 77904		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) VWCA
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMBLE, COLLIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) SOLUTION ENGINEER		Employer (See Instructions) SALESFORCE
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMBLE, COLLIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) SOLUTION ENGINEER		Employer (See Instructions) SALESFORCE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMP, CAROL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HEWITT, TX 76643		
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) INDEPENDENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2141/4629 Rpt: 2144/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMP, CAROL <hr/> 6 Contributor address; City; State; Zip Code HEWITT, TX 76643	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		9 Employer (See Instructions) INDEPENDENT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMP, JANE <hr/> Contributor address; City; State; Zip Code FALLBROOK, CA 92028	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMP, JAPAULA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMP, NANCY <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMPF, KARI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) HOUSTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMPNER, RANDALL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) RANDALL KEMPNER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMPNER, RANDALL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RANDALL KEMPNER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDALL, ELISE <hr/> Contributor address; City; State; Zip Code NEWPORT COAST, CA 92657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) LIBERTY MUTUAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDALL, ELISE <hr/> Contributor address; City; State; Zip Code NEWPORT COAST, CA 92657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) LIBERTY MUTUAL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDALL, KAREN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2143/4629 Rpt: 2146/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDALL, KAREN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) HUMAN RESOURCES		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDALL, SHERRY <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73142	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDELBACHER, THOMAS <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) AIRBUS US SPACE & DEFENSE, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDRICK, JOHN <hr/> Contributor address; City; State; Zip Code ELLCOTT CITY, MD 21043	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMPUTER SCIENCE		Employer (See Instructions) SECURE INNOVATIONS, LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDRICK, SUE <hr/> Contributor address; City; State; Zip Code PORT LAVACA, TX 77979	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENDRICK, SUE <hr/> 6 Contributor address; City; State; Zip Code PORT LAVACA, TX 77979	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENMOTSU, RAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL HEALTH		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADJUNCT PROF		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CHERI <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76207	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CHERI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CHERI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CHERI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CHRISTINA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2146/4629 Rpt: 2149/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, COLLEEN <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, CT 06234	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MARKETING ASSISTANT		9 Employer (See Instructions) BROOKWOOD COMPANIES INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, COLLEEN <hr/> Contributor address; City; State; Zip Code BROOKLYN, CT 06234	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING ASSISTANT		Employer (See Instructions) BROOKWOOD COMPANIES INC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CONSTANCE <hr/> Contributor address; City; State; Zip Code RIVERSIDE, CA 92509	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CONSTANCE <hr/> Contributor address; City; State; Zip Code RIVERSIDE, CA 92509	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, CONSTANCE <hr/> Contributor address; City; State; Zip Code RIVERSIDE, CA 92509	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2147/4629 Rpt: 2150/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, HEATHER <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) KARST ECOLOGIST		Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 79745	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) BIOLOGIST		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, KATHLEEN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, KATHLEEN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2148/4629 Rpt: 2151/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		9 Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) COLLEGE ADJUNCT PROFESSOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2149/4629 Rpt: 2152/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		9 Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2150/4629 Rpt: 2153/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417		
8 Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		9 Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417		
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417		
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417		
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417		
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2151/4629 Rpt: 2154/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, LINDA <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424-1417	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) COLLEGE ADJUNCT PROFESSOR		9 Employer (See Instructions) WAYLAND BAPTIST UNIVERSITY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, MARY <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PATRICIA <hr/> Contributor address; City; State; Zip Code BROOKFIELD, VT 05036	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PATRICIA <hr/> Contributor address; City; State; Zip Code BROOKFIELD, VT 05036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2152/4629 Rpt: 2155/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2153/4629 Rpt: 2156/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, PEGGY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, SARAH <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, SHELLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) KAP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, SHELLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) KAP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2154/4629 Rpt: 2157/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEDY, ULRIKE <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNERLY, FRED <hr/> Contributor address; City; State; Zip Code ROCKFORD, IL 61107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEY, GREGORY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEY, GREGORY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEY, MARTHA <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40206	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) LCSW		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2155/4629 Rpt: 2158/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEY, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code WOODSTOCK, IL 60098	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) DYSTOPIC BLISS PRESS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNEY, STEPHEN <hr/> Contributor address; City; State; Zip Code WOODSTOCK, IL 60098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) DYSTOPIC BLISS PRESS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNON, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) WE VALUE INVESTMENTS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNON, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) WE VALUE INVESTMENTS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNY, JANIS <hr/> Contributor address; City; State; Zip Code WARREN, MI 48093	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2156/4629 Rpt: 2159/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENNY, JANIS	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code WARREN, MI 48093		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENT, SHELLEY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90034		
Principal occupation / Job title (See Instructions) MOVIE TV MARKETING		Employer (See Instructions) LA6721
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KENT, SHELLEY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90034		
Principal occupation / Job title (See Instructions) MOVIE TV MARKETING		Employer (See Instructions) LA6721
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEPNER, MARILYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) RN CASE MANAGER		Employer (See Instructions) BAYLOR SURGICAL HOSPITAL PARK PLACE FORT WORTH
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEPNER, MARILYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) RN CASE MANAGER		Employer (See Instructions) BAYLOR SURGICAL HOSPITAL PARK PLACE FORT WORTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2157/4629 Rpt: 2160/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEPNER, MARILYN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76123	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEREMITSIS, EILEEN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERESTURY, DEBORA <hr/> Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49544	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SECURITY GUARD		Employer (See Instructions) DK SECURITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERLEY, BONNIE <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37909	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERLICK, DAVID <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2158/4629 Rpt: 2161/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERN, JULIE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code NEW YORK, NY 10128		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, CHRIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76013		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, GARLAND	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) BLACKBURN & CARTER, PC
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, STANLEY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MANOR, TX 78653		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) TRAVIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, SUZANNE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2159/4629 Rpt: 2162/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERR, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERSKI, CINDY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERSKI, CINDY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KERVANDJIAN, MELINA <hr/> Contributor address; City; State; Zip Code TROPHY CLUB, TX 76262	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESLER, PAUL <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, PA 19405	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2160/4629 Rpt: 2163/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESLER, PAUL <hr/> 6 Contributor address; City; State; Zip Code BRIDGEPORT, PA 19405	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESLER, PAUL <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, PA 19405	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESSEL, MARK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) STREAMLINES
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESSLER, KAREN <hr/> Contributor address; City; State; Zip Code FOREST PARK, IL 60130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETCHAND, ALICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2161/4629 Rpt: 2164/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETCHUM, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97212	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) FOOD BLOGGER		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETON, JAMES <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETON, JAMES <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETOVER, DEDE <hr/> Contributor address; City; State; Zip Code WEST ROXBURY, MA 02132	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETTLE, EMELE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ESECA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2162/4629 Rpt: 2165/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETTLE, EMELE <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77386	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEVER, SONJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEY, JOLIE <hr/> Contributor address; City; State; Zip Code ENCINO, CA 91316	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEY, JOLIE <hr/> Contributor address; City; State; Zip Code ENCINO, CA 91316	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYBURN, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2163/4629 Rpt: 2166/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYBURN, ROBERT	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78727		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYBURN, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYBURN, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYBURN, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYES, NORMAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77523		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2164/4629 Rpt: 2167/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYES, NORMAN <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77523	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEYSOR, GEORGIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHALSA, GURUDARSHAN <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95126	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARCHIVIST		Employer (See Instructions) STANFORD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, DON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, DON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2165/4629 Rpt: 2168/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, JOE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77089	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, SAIF <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, SHAPNIK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2166/4629 Rpt: 2169/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, SHAPNIK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77407	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, UMAIR <hr/> Contributor address; City; State; Zip Code IRVING, TX 75038	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAN, ZEB <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OFFICE ADMIN		Employer (See Instructions) MAHMOOD R KHAN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHARE, INDRAJIT <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) HEAD OF PRODUCT		Employer (See Instructions) CONVEX
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAWAJA, OMAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE OF OMAR KHAWAJA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2167/4629 Rpt: 2170/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHAWAJA, OMAR	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77024		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICE OF OMAR KHAWAJA
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHERKHER, STEVEN	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) KHERKHER GARCIA, LLP
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHOSROWPOUR, DARLENE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) HEALTHMARKIT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHOURY, STEPHEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KELSOE KHOURY ROGERS & CLARK PC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHWAJA, SHARIQ	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UT-PHYSICIANS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2168/4629 Rpt: 2171/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIBUKA, GRACE	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77088		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KICKERILLO, VINCENT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) BUILDERS		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIDD, SHAUNA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIDDER, GENNELL	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148		
Principal occupation / Job title (See Instructions) US GOV		Employer (See Instructions) US GOV
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIEFER, LEA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) PUBLIC HEALTH		Employer (See Instructions) VETERANS AFFAIRS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2169/4629 Rpt: 2172/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIELY, CECILIA <hr/> 6 Contributor address; City; State; Zip Code NOTTINGHAM, NH 03290	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADMISSIONS REVIEWER		9 Employer (See Instructions) UNIVERSITY OF WASHINGTON
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIERNAN, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER/OPERATOR		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIERNAN, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER/OPERATOR		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIERNAN, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER/OPERATOR		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIERNAN, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER/OPERATOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2170/4629 Rpt: 2173/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIERNAN, KIMBERLY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
8 Principal occupation / Job title (See Instructions) OWNER/OPERATOR		9 Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIERNAN, PETER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GALVESTON, TX 77554		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILDAY, SHELLEY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) PUBLIC ADMINISTRATION		Employer (See Instructions) CITY OF AUSTIN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILE, PATSY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code KANSAS CITY, KS 66104		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, AMANDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ELLCOTT CITY, MD 21042		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2171/4629 Rpt: 2174/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77042		
8 Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		9 Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2172/4629 Rpt: 2175/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77042	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		9 Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2173/4629 Rpt: 2176/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77042		
8 Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		9 Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, KYLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) TEXAS AREA MANAGER		Employer (See Instructions) THOMPSON ENGINEERING, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILGORE, MARGARET	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BRANFORD, CT 06405		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILLAM, ADRIAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2174/4629 Rpt: 2177/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILLAM, ADRIAN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILLIAN, ALISON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) SOFTWARE IMPLEMENTATION		Employer (See Instructions) HEALTHCARE CONTROL SYSTEMS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILLIAN, ALISON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) SOFTWARE IMPLEMENTATION		Employer (See Instructions) HEALTHCARE CONTROL SYSTEMS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILMER, MICHELLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN PABLO, CA 94806		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILOH, GREG	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2175/4629 Rpt: 2178/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILROY, ELIZABETH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BERLIN, MA 01503		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILWEIN, DIANNE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ESCONDIDO, CA 92029		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILWEIN, DIANNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ESCONDIDO, CA 92029		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILWEIN, DIANNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ESCONDIDO, CA 92029		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KILWEIN, DIANNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ESCONDIDO, CA 92029		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2176/4629 Rpt: 2179/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIM, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10003	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PRODUCER		9 Employer (See Instructions) ANDERSON HOPKINS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIM, SONJ <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIM, SONJ <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIM, TAE <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85249-3364	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) MCKINSEY AND CO
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIMBELL, ANNE-MARIE <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) ANNE-MARIE KIMBELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2177/4629 Rpt: 2180/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINACH, BARBARA <hr/> 6 Contributor address; City; State; Zip Code GILBERT, AZ 85296	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) ARIZONA STATE UNIVERSITY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINARD, BRANDON <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MOSTYN LAW FIRM
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINARD, BRANDON <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MOSTYN LAW FIRM
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINARD, BRANDON <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MOSTYN LAW FIRM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINCAID, MARGUERITE <hr/> Contributor address; City; State; Zip Code LAKE FOREST, CA 92630	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2178/4629 Rpt: 2181/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINCAID, MARGUERITE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code LAKE FOREST, CA 92630		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINCAID, MARGUERITE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKE FOREST, CA 92630		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINCAID, MARGUERITE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKE FOREST, CA 92630		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINCAID, MARGUERITE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LAKE FOREST, CA 92630		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINCAID, MARGUERITE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKE FOREST, CA 92630		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2179/4629 Rpt: 2182/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIND, GARY <hr/> 6 Contributor address; City; State; Zip Code MOSS BEACH, CA 94038-9696	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINDERGAN, VIKTORIA <hr/> Contributor address; City; State; Zip Code MEDFORD, NJ 08055	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, BARBARA <hr/> Contributor address; City; State; Zip Code MELISSA, TX 75454	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, DAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, DANIEL L <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2180/4629 Rpt: 2183/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code SAUSALITO, CA 94965	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAUSALITO, CA 94965	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, HENRY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) HULK AUTOMOTIVE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, HENRY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) HULK AUTOMOTIVE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, HENRY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) HULK AUTOMOTIVE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2181/4629 Rpt: 2184/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, HENRY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TECHNICIAN		9 Employer (See Instructions) HULK AUTOMOTIVE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HEAD OF MARKETING		Employer (See Instructions) ACTUALIZE AGENCY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSEPH <hr/> Contributor address; City; State; Zip Code GLEN FLORA, TX 77443	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSEPH <hr/> Contributor address; City; State; Zip Code GLEN FLORA, TX 77443	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSEPH <hr/> Contributor address; City; State; Zip Code GLEN FLORA, TX 77443	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2182/4629 Rpt: 2185/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code GLEN FLORA, TX 77443	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSEPH <hr/> Contributor address; City; State; Zip Code GLEN FLORA, TX 77443	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSEPH <hr/> Contributor address; City; State; Zip Code GLEN FLORA, TX 77443	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JUDY <hr/> Contributor address; City; State; Zip Code HIGHLANDS RANCH, CO 80130	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JUDY <hr/> Contributor address; City; State; Zip Code HIGHLANDS RANCH, CO 80130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2183/4629 Rpt: 2186/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, LINDA AND <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77058	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MARCY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MARYLOU <hr/> Contributor address; City; State; Zip Code DOWNERS GROVE, IL 60516	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MEISHENG <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32836	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MEISHENG <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32836	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2184/4629 Rpt: 2187/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MICAH	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78701		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) WINSTEAD PC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723-1825		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MICHAEL	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code ARLINGTON, TX 76016		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, MICHAEL	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code ARLINGTON, TX 76016		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, ROYLE	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2185/4629 Rpt: 2188/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, SALLY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75206	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, SALLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, SALLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, SHEENA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) AGENCY LEADER		Employer (See Instructions) STATE FARM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77061	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) LONE STAR COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2186/4629 Rpt: 2189/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77061	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) LONE STAR COLLEGE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77061	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) LONE STAR COLLEGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, TOM <hr/> Contributor address; City; State; Zip Code VIRGINIA, MN 55792	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, TOM <hr/> Contributor address; City; State; Zip Code VIRGINIA, MN 55792	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, VERONICA TL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2187/4629 Rpt: 2190/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, WILLIAM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code NEEDHAM, MA 02492		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEEDHAM, MA 02492		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, WILLIAM	Amount of Contribution (\$) \$102.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) TUTOR		Employer (See Instructions) SELF-EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, WILLIAM	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code ORINDA, CA 94563		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINGERY, PAUL	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code SAINT SIMONS ISLAND, GA 31522		
Principal occupation / Job title (See Instructions) TOURING MUSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2188/4629 Rpt: 2191/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINGMAN, DAN <hr/> 6 Contributor address; City; State; Zip Code TOPEKA, KS 66614	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		9 Employer (See Instructions) CHERRYWOOD REALTY LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINGSLEY, GRACE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) HOUSTON METHODIST HOSPITAL
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINGSLEY, GRACE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) HOUSTON METHODIST HOSPITAL
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINLAN, JEFF <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76005	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BELL TEXTRON
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINLAN, JEFF <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76005	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BELL TEXTRON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2189/4629 Rpt: 2192/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINLAW, VALERIE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) B.I.S.D.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINLAW, VALERIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) B.I.S.D.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSEY, ALICE	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code DALLAS, TX 75203		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSEY, ALICE	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code DALLAS, TX 75203		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSEY, ALICE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75203		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2190/4629 Rpt: 2193/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSEY, ALICE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75203	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSEY, ALICE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75203	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSEY, ALICE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75203	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KINSLOW, ROBERT <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96816	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SUSTAINABILITY SPEAKER		Employer (See Instructions) SOCIAL ENTREPRENEUR
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRBY, GLENN <hr/> Contributor address; City; State; Zip Code LOS ALAMITOS, CA 90720	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) MATRIX DOOR INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2191/4629 Rpt: 2194/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRBY, JOANNE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code WATERFORD, MI 48329		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRBY, KRISTI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) HAYNES AND BOONE, LLP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRBY, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRBY, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRK, MICHAEL6	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BLOOMSBURG, PA 17815		
Principal occupation / Job title (See Instructions) TE		Employer (See Instructions) SSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2192/4629 Rpt: 2195/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKLAND, JOLEIGH <hr/> 6 Contributor address; City; State; Zip Code SAUGERTIES, NY 12477	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKPATRICK, KELLEY <hr/> Contributor address; City; State; Zip Code TEMPE, AZ 85282-4666	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKPATRICK, MORGAN <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) MARKETING COORDINATOR		Employer (See Instructions) R2M ENGINEERING
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKSE, PATRICIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKSEY, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2193/4629 Rpt: 2196/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKWOOD, MARY <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRKWOOD, MARY <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRSCH, JOEY <hr/> Contributor address; City; State; Zip Code WEST ORANGE, NJ 07052	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRSCH, JOEY <hr/> Contributor address; City; State; Zip Code WEST ORANGE, NJ 07052	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRSHNER, JUDY <hr/> Contributor address; City; State; Zip Code OAKWOOD, CA 90004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2194/4629 Rpt: 2197/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRTON, BARBARA <hr/> 6 Contributor address; City; State; Zip Code MIAMI, FL 33183	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRTON, BARBARA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRTON, BARBARA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33183	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRTON, BARBARA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33183	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIRTON, BARBARA <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33183	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2195/4629 Rpt: 2198/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KISHBAUGH, DONALD <hr/> 6 Contributor address; City; State; Zip Code EASTON, PA 18045	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KISNER, BETTE <hr/> Contributor address; City; State; Zip Code DORCHESTER, MA 02125	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) APRN-BC, MSN		Employer (See Instructions) SELF-EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KISSLINGER, LEONARD <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15213	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITCHELL, ELLEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTSW
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITCHENS, MARILYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2196/4629 Rpt: 2199/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITCHENS, MARILYN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77069		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITE, DAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32244		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DAN KITE PINSTRIPING
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITE, DAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32244		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DAN KITE PINSTRIPING
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITTLE, KATHLEEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75010		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITTLE, KATHLEEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75010		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2197/4629 Rpt: 2200/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIZAKI, EDYTHE <hr/> 6 Contributor address; City; State; Zip Code FRYEBURG, ME 04037	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) INTERVIEWER		9 Employer (See Instructions) NEW HAMPSHIRE EMPLOYMENT SECURITY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLAMANN, DAVID <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80303	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLAUS, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DENTAL HYGIENIST		Employer (See Instructions) DESIGNER SMILES
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLAUS, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DENTAL HYGIENIST		Employer (See Instructions) DESIGNER SMILES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, ANN <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94618	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2198/4629 Rpt: 2201/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, CARI <hr/> 6 Contributor address; City; State; Zip Code CATONSVILLE, MD 21228	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, CARI <hr/> Contributor address; City; State; Zip Code CATONSVILLE, MD 21228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, CARI <hr/> Contributor address; City; State; Zip Code CATONSVILLE, MD 21228	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, GRANT <hr/> Contributor address; City; State; Zip Code DENVER, CO 80223	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) PROLOGIS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, GRANT <hr/> Contributor address; City; State; Zip Code DENVER, CO 80223	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) PROLOGIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2199/4629 Rpt: 2202/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, LARRY <hr/> 6 Contributor address; City; State; Zip Code SOMERSET, NJ 08873	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, RUTH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) HAVEN HOME HEALTH LLC
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, RUTH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) HAVEN HOME HEALTH LLC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, STEFANIE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76018	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) CANDIDATE CAMPAIGN		Employer (See Instructions) STEFANIE KLEIN FOR JUDGE CAMPAIGN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, TERESA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) DEL MAR COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2200/4629 Rpt: 2203/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, TERESA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) DEL MAR COLLEGE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEIN, TERESA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) DEL MAR COLLEGE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEINFELD, LORI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75024		
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) FRESENIUS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEINFELD, LORI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75024		
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) FRESENIUS
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEINPETER, AMY E CLARK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MANOR, TX 78653		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CIMENT LAW FIRM PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2201/4629 Rpt: 2204/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEINPETER, AMY E CLARK <hr/> 6 Contributor address; City; State; Zip Code MANOR, TX 78653	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) CIMENT LAW FIRM PLLC
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEKMAN, JON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) TEACHER RETIREMENT SYSTEM
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEKMAN, JON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) TEACHER RETIREMENT SYSTEM
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEKMAN, JON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) TRS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEMANN, MARIE <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34108	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2202/4629 Rpt: 2205/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEMANN, MARIE <hr/> 6 Contributor address; City; State; Zip Code NAPLES, FL 34108	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLEMANN, MARIE <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34108	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLESTZICK, BARBARA <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22202	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLIMAS, PAT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLIMAS, PAT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2203/4629 Rpt: 2206/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
8 Principal occupation / Job title (See Instructions) CREATIVE DURECTPR		9 Employer (See Instructions) BIW
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
Principal occupation / Job title (See Instructions) SR. CREATIVE DIRECTOR		Employer (See Instructions) BI WORLDWIDE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
Principal occupation / Job title (See Instructions) SR. CREATIVE DIRECTOR		Employer (See Instructions) BI WORLDWIDE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
Principal occupation / Job title (See Instructions) CREATIVE DURECTPR		Employer (See Instructions) BIW
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
Principal occupation / Job title (See Instructions) CREATIVE DURECTPR		Employer (See Instructions) BIW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2204/4629 Rpt: 2207/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
8 Principal occupation / Job title (See Instructions) CREATIVE DURECTPR		9 Employer (See Instructions) BIW
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, JULIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55431		
Principal occupation / Job title (See Instructions) CREATIVE DURECTPR		Employer (See Instructions) BIW
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, LI-SHEN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions) LI-SHEN KLINE		Employer (See Instructions) LSK & ASSOCIATES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINE, ROBERT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLING, KELSEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) TEXAS AFT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2205/4629 Rpt: 2208/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLING, KELSEY <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CURRICULUM SPECILAIST		9 Employer (See Instructions) TEXAS EDUCATION AGENCY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLING, KELSEY <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) TEXAS AFT
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLING, KELSEY <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) TEXAS AFT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINGER, MARIE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINGER, MARIE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2206/4629 Rpt: 2209/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLINGER, MARIE <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLION, HOWARD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLITGORD, KIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLITZMAN, SUSAN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HIGHER ED ADMIN		Employer (See Instructions) CUNY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLIVANS, ELINOR <hr/> Contributor address; City; State; Zip Code CAMDEN, ME 04843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2207/4629 Rpt: 2210/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLIVANS, ELINOR <hr/> 6 Contributor address; City; State; Zip Code CAMDEN, ME 04843	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLIVANS, ELINOR <hr/> Contributor address; City; State; Zip Code CAMDEN, ME 04843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLORES, JILL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) LIGHTING DEIGER		Employer (See Instructions) ELDS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOSE, JOANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOSE, JOANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2208/4629 Rpt: 2211/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOTT, KAREN <hr/> 6 Contributor address; City; State; Zip Code KALAMAZOO, MI 49009	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNABE, DOUGLAS <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNABE, DOUGLAS <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, BRIAN <hr/> Contributor address; City; State; Zip Code SHAWANO, WI 54166	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, MARJORIE <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2209/4629 Rpt: 2212/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, MARJORIE <hr/> 6 Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, MARJORIE <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, MARJORIE <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, MARJORIE <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPP, MARJORIE <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2210/4629 Rpt: 2213/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPTON, EDWARD	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) DELL INC.
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNAPTON, EDWARD	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DELL INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNEER, KIMBERLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BENTONVILLE, AR 72712		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNEZOVICH, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CHICAGO, IL 60605		
Principal occupation / Job title (See Instructions) COMMUNICATIONS		Employer (See Instructions) PHIUS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, ANITA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2211/4629 Rpt: 2214/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, DAVID <hr/> 6 Contributor address; City; State; Zip Code BOTHELL, WA 98011	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, KAREN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, KAREN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, KAREN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, KIMBERLY DAWN <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2212/4629 Rpt: 2215/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, MARY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78759-7338		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, MARY	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759-7338		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2213/4629 Rpt: 2216/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ONALASKA, TX 77360		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ONALASKA, TX 77360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2214/4629 Rpt: 2217/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H <hr/> 6 Contributor address; City; State; Zip Code ONALASKA, TX 77360	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H <hr/> Contributor address; City; State; Zip Code ONALASKA, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H <hr/> Contributor address; City; State; Zip Code ONALASKA, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, S H <hr/> Contributor address; City; State; Zip Code ONALASKA, TX 77360	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHTEN, PATRICIA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2215/4629 Rpt: 2218/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHTON, TERRY <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHTON, TERRY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIOLEK, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOPF, PETER <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOPF, PETER <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2216/4629 Rpt: 2219/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOTT, ARTHUR	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOTT, ARTHUR	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOWLES, NANCY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code FORT WALTON BEACH, FL 32547		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOWLTON, SANDRA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84109		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, CINDY & ED	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ABILENE, TX 79602-4142		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2217/4629 Rpt: 2220/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, CINDY & ED <hr/> 6 Contributor address; City; State; Zip Code ABILENE, TX 79602-4142	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, CINDY & ED <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602-4142	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, CINDY & ED <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602-4142	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, MELBURN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SATAN
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, MELBURN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SATAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2218/4629 Rpt: 2221/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNUDSON, CRAIG <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOBES, RICHARD <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOBES, RICHARD <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOBES, RICHARD <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCH, DEBI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2219/4629 Rpt: 2222/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCH, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) BAYLOR
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCH, JULIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCHKODAN, MARK <hr/> Contributor address; City; State; Zip Code CORAL SPRINGS, FL 33065-4319	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCUREK, JULIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) JUDE		Employer (See Instructions) STATE OF TEXAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOECHLIN, EMILY <hr/> Contributor address; City; State; Zip Code TAKOMA PARK, MD 20912-6419	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2220/4629 Rpt: 2223/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOEL, KEVIN <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) CAPITAL FARM CREDIT
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOEL, KEVIN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CAPITAL FARM CREDIT
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOEN, BOBBIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOEN, BOBBIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOEN, TERRI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) YOGA TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2221/4629 Rpt: 2224/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOERBEL, NANCY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PITTSBURGH, PA 15205		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) U OF PGH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOGAN, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11218		
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) SPRINGVALE APTS CO.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHL, KATHRYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SALEM, OR 97317		
Principal occupation / Job title (See Instructions) ASSEMBLY/MANUFACTURING		Employer (See Instructions) GARMIN
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHLE, MARC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LITHION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHLE-ABEITA, FREIDA	Amount of Contribution (\$) \$76.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) HAIRSTYLIST/OWNER		Employer (See Instructions) ZIG ZAG SALON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2222/4629 Rpt: 2225/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHNERT, PEGGIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) SELF AFFILIATED WITH KELLER WILLIAMS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHNERT, PEGGIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF AFFILIATED WITH KELLER WILLIAMS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHNERT, PEGGIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF AFFILIATED WITH KELLER WILLIAMS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHNERT, PEGGIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF AFFILIATED WITH KELLER WILLIAMS
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHNERT, PEGGIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF AFFILIATED WITH KELLER WILLIAMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2223/4629 Rpt: 2226/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOHNERT-, VAIL <hr/> 6 Contributor address; City; State; Zip Code BOSTON, MA 77098	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ASSISTANT REGIONAL DIRECTOR		9 Employer (See Instructions) UNITED AUTO WORKERS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOIVULA, CAROLYN <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOIVULA, CAROLYN <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLB, JULIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADJUNCT IT		Employer (See Instructions) STATE OF TEXAS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLB, JULIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADJUNCT IT		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2224/4629 Rpt: 2227/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLENOVSKY, GLADYS <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLIA, FIONA <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504-7707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLICH, THOMAS <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLODZIEJCZYK, BELVA <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLTKO, PHIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) PREFER NOT TO ANSWER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2225/4629 Rpt: 2228/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOLTKO, PHIL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) PREFER NOT TO ANSWER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KONDOFF, KARYN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRAINING COORDINATOR		Employer (See Instructions) UT AUSTIN
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KONDRA, DHANASHRI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759-4502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KONDYLOPOULOS, SUZANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) SR. LOAN OFFICER		Employer (See Instructions) LOANDEPOT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPLOVITZ, KAY <hr/> Contributor address; City; State; Zip Code NEW YORK CITY, NY 10023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INVESTOR ADVISOR		Employer (See Instructions) KOPLOVITZ & CO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2226/4629 Rpt: 2229/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPLOVITZ, KAY <hr/> 6 Contributor address; City; State; Zip Code NEW YORK CITY, NY 10023	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) INVESTOR ADVISOR		9 Employer (See Instructions) KOPLOVITZ & CO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPP, DOUGLAS <hr/> Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33308	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPP, SANDRA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPPIEN, KIM <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) NYSE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPSER, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739-1728	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) GRAYLINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2227/4629 Rpt: 2230/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORANEK, MARGARET <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORGEL, SKYLER <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76085	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANUFACTURING ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORGEL, SKYLER <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76085	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANUFACTURING ENGINEER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORMAN, BARBARA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORTH, CYNTHIA <hr/> Contributor address; City; State; Zip Code LLANO, TX 78643	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2228/4629 Rpt: 2231/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORTH-JURICEK, ASHLEY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78752	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORTH-JURICEK, ASHLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORTUM, RICHARD <hr/> Contributor address; City; State; Zip Code APTOS, CA 95003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORTUM, RICHARD <hr/> Contributor address; City; State; Zip Code APTOS, CA 95003	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORTUM, SHELBY <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80227	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2229/4629 Rpt: 2232/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KORUS, DEB <hr/> 6 Contributor address; City; State; Zip Code LA FARGE, WI 54639	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSCH, KEVIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSCH, KEVIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSOBUD, TERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSOBUD, TERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2230/4629 Rpt: 2233/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSOBUD, TERRY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSTER, WENDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75223	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOSTREBA, JACKIE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTINEK, JANE <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KLEIN ISD
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTINEK, JONATHAN <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION ADMINISTRATION		Employer (See Instructions) TEXAS A&M UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2231/4629 Rpt: 2234/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTINEK, JONATHAN <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) HIGHER EDUCATION ADMINISTRATION		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTINEK, NANCY <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) MRI TECHNOLOGIST		Employer (See Instructions) KSF ORTHOPEDIC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTYS, JODY L. <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOTZ, JACK <hr/> Contributor address; City; State; Zip Code CHARLESTON, SC 29412	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOUTS, ROBERT <hr/> Contributor address; City; State; Zip Code ROSHARON, TX 77583	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2232/4629 Rpt: 2235/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOUTS, SUSAN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PEARLAND, TX 77584		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOUTSKY, BARBARA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WOODRIDGE, IL 60517		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVACH, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77219		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVACH, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77219		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVACH, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77219		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2233/4629 Rpt: 2236/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVACH, JAMES	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) HARRIS CO.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVICH, SARAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) RIDESHARE2VOTE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVICH, SARAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) RIDESHARE2VOTE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOVICH, SARAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) RIDESHARE2VOTE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOWALCHUK, ALICIA ANN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BCM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2234/4629 Rpt: 2237/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOWALCHUK, ALICIA ANN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) BCM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOWALSKY, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOWALSKY, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOYM, KEVIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) TECH RANCH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOZMA, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2235/4629 Rpt: 2238/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOZMA, ANDREW <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOZMA, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOZMA, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRACHT, RUSSELL <hr/> Contributor address; City; State; Zip Code HUFFMAN, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRACHT, RUSSELL <hr/> Contributor address; City; State; Zip Code HUFFMAN, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2236/4629 Rpt: 2239/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRACHT, RUSSELL <hr/> 6 Contributor address; City; State; Zip Code HUFFMAN, TX 77336	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRACHT, RUSSELL <hr/> Contributor address; City; State; Zip Code HUFFMAN, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRACHT, RUSSELL <hr/> Contributor address; City; State; Zip Code HUFFMAN, TX 77336	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRACHT, RUSSELL <hr/> Contributor address; City; State; Zip Code HUFFMAN, TX 77336	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAEMER, KENNETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2237/4629 Rpt: 2240/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAFT, EVAN <hr/> 6 Contributor address; City; State; Zip Code WAYNE, NJ 07470	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		9 Employer (See Instructions) AMERICAN UNIVERSITY
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAFT, EVAN <hr/> Contributor address; City; State; Zip Code WAYNE, NJ 07470	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) AMERICAN UNIVERSITY
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAFT, EVAN <hr/> Contributor address; City; State; Zip Code WAYNE, NJ 07470	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) AMERICAN UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAFT-ISHIHAMA, DAVID <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) INDEED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAFT-ISHIHAMA, DAVID <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) INDEED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2238/4629 Rpt: 2241/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAHN, JEFFREY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77040	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) EDUCATION		9 Employer (See Instructions) CARDINAL HEALTH
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAL, BRIAN <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SECURITY OFFICER		Employer (See Instructions) FIRST CHURCH OF CHRIST SCIENTISTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAL, BRIAN <hr/> Contributor address; City; State; Zip Code GREEN BAY, WI 54303	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SECURITY OFFICER		Employer (See Instructions) FIRST CHURCH OF CHRIST SCIENTISTS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRALJ, NICHOLAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$147.00
Principal occupation / Job title (See Instructions) LOBBY		Employer (See Instructions) KRALJ CONSULTING, INC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRALJEVIC, IVAN <hr/> Contributor address; City; State; Zip Code CORAL SPRINGS, FL 33076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) MOTOROLA SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2239/4629 Rpt: 2242/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAM, LINDA	7 Amount of Contribution (\$) \$10.12
6 Contributor address; City; State; Zip Code SAINT LOUIS, MO 63132		
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAMER, MICHELE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRANZ, MARY ANN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEKOOSA, WI 54457		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRASNE, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRASNE, ROBIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) ALAMO AUTO SUPPLY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2240/4629 Rpt: 2243/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRASNER, LARRY <hr/> 6 Contributor address; City; State; Zip Code BURLINGTON, VT 05408-2793	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRASNOGOR, LESTER <hr/> Contributor address; City; State; Zip Code CHAPPAQUA, NY 10514	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRASNOGOR, LESTER <hr/> Contributor address; City; State; Zip Code CHAPPAQUA, NY 10514	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRASNOGOR, LESTER <hr/> Contributor address; City; State; Zip Code CHAPPAQUA, NY 10514	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRATZMANN, MONIKA <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02110	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) SENIOR COLLECTOR		Employer (See Instructions) INTERSYSTEMS CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2241/4629 Rpt: 2244/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRATZMANN, MONIKA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code BOSTON, MA 02110		
8 Principal occupation / Job title (See Instructions) SENIOR COLLECTOR		9 Employer (See Instructions) INTERSYSTEMS CORPORATION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRATZMANN, MONIKA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOSTON, MA 02110		
Principal occupation / Job title (See Instructions) SENIOR COLLECTOR		Employer (See Instructions) INTERSYSTEMS CORPORATION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRATZMANN, MONIKA	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code BOSTON, MA 02110		
Principal occupation / Job title (See Instructions) SENIOR COLLECTOR		Employer (See Instructions) INTERSYSTEMS CORPORATION
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRATZMANN, MONIKA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BOSTON, MA 02110		
Principal occupation / Job title (See Instructions) SENIOR COLLECTOR		Employer (See Instructions) INTERSYSTEMS CORPORATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, BRUCE	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code SPRING, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2242/4629 Rpt: 2245/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, LIBBY <hr/> 6 Contributor address; City; State; Zip Code ROCKPORT, TX 78382	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, LIBBY <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSE, ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSSE, ANNETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 73703	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRAUSSE, ANNETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 73703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2243/4629 Rpt: 2246/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREBS, MARIE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78747		
8 Principal occupation / Job title (See Instructions) THERAPIST/INTERVENTIONIST		9 Employer (See Instructions) SELF EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREBS, MARIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78747		
Principal occupation / Job title (See Instructions) THERAPIST/INTERVENTIONIST		Employer (See Instructions) SELF EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREMER, MARGARET	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WOODLANDS, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREMER, MARGARET	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WOODLANDS, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREMER, MARGARET C	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2244/4629 Rpt: 2247/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREMER, MARGARET C <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRESSIN, MEGAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PATHOLOGIST		Employer (See Instructions) CLINICAL PATHOLOGY ASSOCIATES
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRESSIN, MEGAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PATHOLOGIST		Employer (See Instructions) CLINICAL PATHOLOGY ASSOCIATES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KREUSER, MARY <hr/> Contributor address; City; State; Zip Code THERESA, WI 53091	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRIST, KIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2245/4629 Rpt: 2248/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRIST, KIM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRISTENSEN, KATE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRISTINA, WOODS <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) BODY MIND & SOUL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRITZBERG, WILLIAM <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRITZBERG, WILLIAM <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2246/4629 Rpt: 2249/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRITZBERG, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97229	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRIZEK, MARY BRIGID <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) LISD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRIZEK, MARY BRIGID <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) LISD
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRIZEK, MARY BRIGID <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) LISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KROEGER, RANDY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2247/4629 Rpt: 2250/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRON, CARLA AND TOM <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRON, CARLA AND TOM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRON, CARLA AND TOM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRON, CARLA AND TOM <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KROW-LUCAL, STEVEN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30341	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2248/4629 Rpt: 2251/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KROW-LUCAL, STEVEN <hr/> 6 Contributor address; City; State; Zip Code SUNNYVALE, CA 94086	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUDOP, WALTER <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUEGER, MARLENE <hr/> Contributor address; City; State; Zip Code ESTES PARK, CO 80517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUG, COURTNEY <hr/> Contributor address; City; State; Zip Code BELLWOOD, PA 16617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) IRS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUGEL-LER, CHERYL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60657	Amount of Contribution (\$) \$72.00
Principal occupation / Job title (See Instructions) SONOGRAPHER		Employer (See Instructions) NORTHWESTERN MEMORIAL HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2249/4629 Rpt: 2252/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRULEWITZ, JUDITH <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, MA 02476-8019	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUM, ANNE <hr/> Contributor address; City; State; Zip Code BROOMFIELD, CO 80023	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUM, ANNE <hr/> Contributor address; City; State; Zip Code BROOMFIELD, CO 80023	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRUMLAUF, MICHAEL <hr/> Contributor address; City; State; Zip Code ROCKBRIDGE, OH 43149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KRYSINSKI, ELLEN <hr/> Contributor address; City; State; Zip Code MUNHALL, PA 15120	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2250/4629 Rpt: 2253/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUAN, FLORA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CHAPPAQUA, NY 10514		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) MANHATTANVILLE COLLEGE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBA, RICHARD	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HAGERSTOWN, MD 21740		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBALA, MARTHA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBBS, MACELENE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SEATTLE, WA 98125		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBBS, MACELENE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SEATTLE, WA 98125		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2251/4629 Rpt: 2254/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBBS, MACELENE <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98125	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBECKA, MICHAEL <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NETWORK ENGR		Employer (See Instructions) EXPEDIA, INC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBISZYN, THOMAS <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUBOVCIK, MELINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78244	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ONEDIGITAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUEHL, JOAN <hr/> Contributor address; City; State; Zip Code PONDER, TX 76259	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) ELEVATE CREDIT, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2252/4629 Rpt: 2255/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUEHN, ARTHUR <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75229	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) N/A
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUHN, GORDON <hr/> Contributor address; City; State; Zip Code OKATIE, SC 29909	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUHN, GORDON <hr/> Contributor address; City; State; Zip Code OKATIE, SC 29909	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUHN, GORDON <hr/> Contributor address; City; State; Zip Code OKATIE, SC 29909	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUHN, GORDON <hr/> Contributor address; City; State; Zip Code OKATIE, SC 29909	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2253/4629 Rpt: 2256/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUHN, GORDON <hr/> 6 Contributor address; City; State; Zip Code OKATIE, SC 29909	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUIPERS, BENJAMIN <hr/> Contributor address; City; State; Zip Code YPSILANTI, MI 48197	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULICK, KAREN <hr/> Contributor address; City; State; Zip Code NORCO, CA 92860	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) MONSTER ENERGY CO.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULISEK, JAMES <hr/> Contributor address; City; State; Zip Code NEWBURGH, NY 12550	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULKARNI, ISHANI <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) TRIDAL TECNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2254/4629 Rpt: 2257/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULL, VEDA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ROWLETT, TX 75088		
8 Principal occupation / Job title (See Instructions) SCHOOL LIBRSRIAN		9 Employer (See Instructions) DALLAS ISD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULL, VEDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROWLETT, TX 75088		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULL, VEDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROWLETT, TX 75088		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULL, VEDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ROWLETT, TX 75088		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULL, VEDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROWLETT, TX 75088		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2255/4629 Rpt: 2258/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULL, VEDA <hr/> 6 Contributor address; City; State; Zip Code ROWLETT, TX 75088	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KULUPKA, TERESA <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ONLINE MARKETING DIR		Employer (See Instructions) NORWEX
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUMAR, SEEMA <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) MYTONOMY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUMMINS, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUN, THOMAS <hr/> Contributor address; City; State; Zip Code CLOVIS, NM 88101	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) KNOWLEDGE MANAGER		Employer (See Instructions) US AIR FORCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2256/4629 Rpt: 2259/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUN, THOMAS <hr/> 6 Contributor address; City; State; Zip Code CLOVIS, NM 88101	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) KNOWLEDGE MANAGER		9 Employer (See Instructions) US AIR FORCE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUN, THOMAS <hr/> Contributor address; City; State; Zip Code APO, AE 09128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) KNOWLEDGE MANAGER		Employer (See Instructions) US AIR FORCE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUN, THOMAS <hr/> Contributor address; City; State; Zip Code APO, AE 09128	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) KNOWLEDGE MANAGER		Employer (See Instructions) US AIR FORCE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUNDINGER, RAVELLE <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUNDINGER, RAVELLE <hr/> Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2257/4629 Rpt: 2260/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUNDINGER, RAVELLE <hr/> 6 Contributor address; City; State; Zip Code HORSESHOE BAY, TX 78654	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUNNATHUSSERIL, ANNAMMA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PH&HS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUNNATHUSSERIL, ANNAMMA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) PH&HS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUO, ELLEN <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUPFERSCHMID, KRISTINA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HISTORIAN		Employer (See Instructions) HHM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2258/4629 Rpt: 2261/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURIAKOSE, EMY <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77382	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) TEXAS CHILDRENS HOSPITAL
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURTH, LYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL CONSULTANT		Employer (See Instructions) ERG
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURTH, LYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL CONSULTANT		Employer (See Instructions) ERG
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURTZ, MARJORIE <hr/> Contributor address; City; State; Zip Code MADISON, WI 53718	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) STATE OF WIS.
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURZ, ALAINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2259/4629 Rpt: 2262/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURZ, ALAINA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURZ, THERESA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KURZ, THERESA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUTCHEN, JAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TAX ACCOUNTANT		Employer (See Instructions) DELOITTE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUTTY, RAFIQ <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PMA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2260/4629 Rpt: 2263/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUTZKO, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code BURLINGTON, VT 05401	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUTZKO, DEBORAH <hr/> Contributor address; City; State; Zip Code BURLINGTON, VT 05401	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUWANA, SUSAN E <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22315	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEERING		Employer (See Instructions) MITRE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUWANA, SUSAN E <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ENGINEERING		Employer (See Instructions) MITRE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUYKENDALL, DEANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LEGISLATIVE CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2261/4629 Rpt: 2264/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUYKENDALL, DEANNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) LEGISLATIVE CONSULTANT		9 Employer (See Instructions) SELF (DEANNA L. KUYKENDALL INC)
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KWON, ZEENATROOHI <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRAINING SUPERVISOR		Employer (See Instructions) AUSTIN POLICE DEPARTMENT
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KYBA, FERNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KYBA, FERNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KYLE, RODNEY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2262/4629 Rpt: 2265/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L. WACHOWIAK, KENNETH	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code MAPLE GROVE, MN 55311		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L. WALKER, SHARON	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76016		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LA ROCK, BEVERLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAAKMAN, FRAN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LABAT, TERRY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FAIRFAX, VA 22031		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2263/4629 Rpt: 2266/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LABEAUX, RHENA <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77705	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LABEAUX, RHENA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LABYER, CRIS <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LABYER, CRIS <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACAVA, ADRIENNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287-3967	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2264/4629 Rpt: 2267/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACAVA, ADRIENNE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287-3967	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACERDO, ELLA <hr/> Contributor address; City; State; Zip Code WAIANAE, HI 96792-3224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACHENMEIER, RUDY R. <hr/> Contributor address; City; State; Zip Code NEWBERG, OR 97132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MEDIATION		Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACHENMEIER, RUDY R. <hr/> Contributor address; City; State; Zip Code NEWBERG, OR 97132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MEDIATION		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACHMAN, TERRI <hr/> Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33704	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2265/4629 Rpt: 2268/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACHMAN, TERRI <hr/> 6 Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33704	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACHMAN, TERRI <hr/> Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33704	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACHMAN, TERRI <hr/> Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKEY, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) SAN ANGELO EARLY CHILDHOOD CENTER
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKEY, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) SAN ANGELO EARLY CHILDHOOD CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2266/4629 Rpt: 2269/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKMANN, LAURENCE <hr/> 6 Contributor address; City; State; Zip Code PLACENTIA, CA 92870	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKRITZ, JUDY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACROIX, LARNA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACROIX, LARNA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, BENJAMIN <hr/> Contributor address; City; State; Zip Code WACO, TX 76710-1718	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) COMMUNITY BANK & TRUST

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2267/4629 Rpt: 2270/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE <hr/> 6 Contributor address; City; State; Zip Code BOULDER, CO 80302	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2268/4629 Rpt: 2271/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BOULDER, CO 80302		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, LESLIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BOULDER, CO 80302		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LADD, KAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FLINT, TX 75762		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LADIN, MARILYN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LADIN, MARILYN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2269/4629 Rpt: 2272/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LADJEVARDIAN, SIMA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LADWIG, MARJORY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LADWIG, MARJORY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAFALCE, BOB <hr/> Contributor address; City; State; Zip Code WHEAT RIDGE, CO 80033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAFLEUR, JENNA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2270/4629 Rpt: 2273/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAFRANCE, ROBERTA <hr/> 6 Contributor address; City; State; Zip Code SAN LEANDRO, CA 94579	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) WINE SALES REP.		9 Employer (See Instructions) WINE WAREHOUSE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAFRANCE, ROBERTA <hr/> Contributor address; City; State; Zip Code SAN LEANDRO, CA 94579	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) WINE SALES REP.		Employer (See Instructions) WINE WAREHOUSE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAFRANCE, ROBERTA <hr/> Contributor address; City; State; Zip Code SAN LEANDRO, CA 94579	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) WINE SALES REP.		Employer (See Instructions) WINE WAREHOUSE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAFUENTE, ALLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGANA, ROBERTO <hr/> Contributor address; City; State; Zip Code SOCORRO, TX 79927	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2271/4629 Rpt: 2274/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGANA, ROBERTO <hr/> 6 Contributor address; City; State; Zip Code SOCORRO, TX 79927	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGERBLAD, ROBERT <hr/> Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) MERLIN AUTOMATION INC.
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGERBLAD, ROBERT <hr/> Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) MERLIN AUTOMATION INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGRAND, JOHN <hr/> Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49507	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAGUETTE, ARIELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) FAVOR DELIVERY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2272/4629 Rpt: 2275/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77006		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) EXXONMOBIL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXXONMOBIL
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXXONMOBIL
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXXONMOBIL
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXXONMOBIL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2273/4629 Rpt: 2276/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) EXXONMOBIL
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHEY, MARIEKE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXXONMOBIL
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHM, PAUL <hr/> Contributor address; City; State; Zip Code WEST CHESTER, PA 19380	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) SOFTWARE QA MANAGER		Employer (See Instructions) SCOIR INC
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAHM, PAUL <hr/> Contributor address; City; State; Zip Code WEST CHESTER, PA 19380	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) SOFTWARE QA MANAGER		Employer (See Instructions) SCOIR INC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAINE, KRISTA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2274/4629 Rpt: 2277/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAINE, MARSHA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) ONLINE SALES		9 Employer (See Instructions) MARSHA LAINE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAINE, MARSHA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ONLINE SALES		Employer (See Instructions) MARSHA LAINE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAIPIS ENO, SARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAIPIS ENO, SARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAJAUNIE, SOPHIA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) NY SENATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2275/4629 Rpt: 2278/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKE, DAVID <hr/> 6 Contributor address; City; State; Zip Code BELVEDERE, CA 94920	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKE, ELLEN <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKE, KENNETH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GEOPHYSICIST		Employer (See Instructions) REPSOL USA
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKE, KENNETH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GEOPHYSICIST		Employer (See Instructions) REPSOL USA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKEHOMER, JAMES <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035-2565	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2276/4629 Rpt: 2279/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKEHOMER, JAMES <hr/> 6 Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035-2565	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKENBACH, CARY <hr/> Contributor address; City; State; Zip Code WEST HARTFORD, CT 06107	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) ACTUARIAL STRATEGIES, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKENBACH, CARY <hr/> Contributor address; City; State; Zip Code WEST HARTFORD, CT 06107	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) ACTUARIAL STRATEGIES, INC.
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LALANI, DILSHAD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HOPE CLINIC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LALANI, SULEMAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2277/4629 Rpt: 2280/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LALLY, HELEN <hr/> 6 Contributor address; City; State; Zip Code MANHATTAN, NY 10128	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) HELEN D. LALLY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAM, WILSON <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMAN, RICHARD W <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745-2809	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMAN, RICHARD W <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745-2809	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMANCE SARRETT, BEN & NANCY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2278/4629 Rpt: 2281/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMANCE SARRETT, BEN & NANCY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB, BENJAMIN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RESEARCH ANALYST		Employer (See Instructions) HARVARD UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB, BENJAMIN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH ANALYST		Employer (See Instructions) HARVARD UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB, DR. JAMES AND MRS. ANN <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37923	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CHEMIST, TECHNICAL EDITOR		Employer (See Instructions) CYCLOMEDICAL INTERNATIONAL, INC.
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB, DR. JAMES AND MRS. ANN <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37923	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CHEMIST, TECHNICAL EDITOR		Employer (See Instructions) CYCLOMEDICAL INTERNATIONAL, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2279/4629 Rpt: 2282/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMB DEN, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) PROS, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, LANA <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, RUTH <hr/> Contributor address; City; State; Zip Code MELBOURNE, FL 32940	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, RUTH <hr/> Contributor address; City; State; Zip Code MELBOURNE, FL 32940	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, RUTH <hr/> Contributor address; City; State; Zip Code MELBOURNE, FL 32940	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2280/4629 Rpt: 2283/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBRIGHT, RANDALL <hr/> 6 Contributor address; City; State; Zip Code SOUTH DAYTONA, FL 32119	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BUSINESS ANALYST		9 Employer (See Instructions) JACK HENRY
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBRIGHT, RANDALL <hr/> Contributor address; City; State; Zip Code SOUTH DAYTONA, FL 32119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) JACK HENRY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMIN, MARILYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMONT, ADAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMONT, ADAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2281/4629 Rpt: 2284/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMOTHE, KIMERER <hr/> 6 Contributor address; City; State; Zip Code GRANVILLE, NY 12832	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMOTTE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552-2550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PA		Employer (See Instructions) SOUTH HEART
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMOTTE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552-2550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PA		Employer (See Instructions) SOUTH HEART
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPE, SUSAN <hr/> Contributor address; City; State; Zip Code COMMERCE, TX 75428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPE, SUSAN <hr/> Contributor address; City; State; Zip Code COMMERCE, TX 75428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2282/4629 Rpt: 2285/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPKA, JOSEPH P <hr/> 6 Contributor address; City; State; Zip Code FLEMING ISLAND, FL 32003	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPSON, NICK <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) RRICELAND HEALTHCARE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPSON, NICK <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) RRICELAND HEALTHCARE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMPSON, NICK <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) RRICELAND HEALTHCARE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMSON, KAREN <hr/> Contributor address; City; State; Zip Code THE DALLES, OR 97058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RENTAL MANAGER		Employer (See Instructions) ROWENA CREST NANOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2283/4629 Rpt: 2286/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMSON, KAREN <hr/> 6 Contributor address; City; State; Zip Code THE DALLES, OR 97058	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RENTAL MANAGER		9 Employer (See Instructions) ROWENA CREST NANOR
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMSON, KAREN <hr/> Contributor address; City; State; Zip Code THE DALLES, OR 97058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RENTAL MANAGER		Employer (See Instructions) ROWENA CREST NANOR
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCASTER, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) HARRIS COUNTY
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCE, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCELIN, ANGELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2284/4629 Rpt: 2287/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCELIN, ANGELA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) STATE OF TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANCTOT, SAMUEL <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20910	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) GEICO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAND, JEROME <hr/> Contributor address; City; State; Zip Code HAMMOND, LA 70403-5126	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAND, MARGARET <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAND, MARGARET <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2285/4629 Rpt: 2288/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAND, MARGARET <hr/> 6 Contributor address; City; State; Zip Code KINGSVILLE, TX 78363	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAND, SARAH <hr/> Contributor address; City; State; Zip Code LAGRANGE PARK, IL 60526	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) NORDSTROM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDAKER, BETSY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDAKER, BETSY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDEROS, VINCENT <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2286/4629 Rpt: 2289/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDERS, THOMAS <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDGRAF, STEPHANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE REP		Employer (See Instructions) BLUE APRON
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDIS, JOHN <hr/> Contributor address; City; State; Zip Code BEVERLY HILLS, CA 90210	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) FILMMAKER		Employer (See Instructions) LEVITSKY PRODUCTIONS, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDIS, JOHN <hr/> Contributor address; City; State; Zip Code BEVERLY HILLS, CA 90210	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) FILMMAKER		Employer (See Instructions) LEVITSKY PRODUCTIONS, INC.
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDRY, DREW <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SOUTH PLAINS COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2287/4629 Rpt: 2290/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDSMAN, STEVE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDSMAN, STEVEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANDY, KAMI <hr/> Contributor address; City; State; Zip Code ALACHUA, FL 32615	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HORSEBACK RIDING INSTRUCTOR		Employer (See Instructions) THUMBS UP RIDING SCHOOL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, BOB <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30312	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) AUTO TECH		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CAROL <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38135	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2288/4629 Rpt: 2291/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SAN JOSE, CA 95118		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95118		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95118		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95118		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95118		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2289/4629 Rpt: 2292/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE <hr/> 6 Contributor address; City; State; Zip Code SAN JOSE, CA 95118	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95118	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, CONSTANCE <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95118	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, ELIZABETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, HELEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2290/4629 Rpt: 2293/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, JEFF	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code RICHMOND, TX 77406		
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, JENNIFER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76205		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANE, NEEL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NORTON ROSE FULBRIGHT LLP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SACRAMENTO, CA 95815		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code WESTPORT, CT 06880		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2291/4629 Rpt: 2294/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY <hr/> 6 Contributor address; City; State; Zip Code WESTPORT, CT 06880	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY <hr/> Contributor address; City; State; Zip Code WESTPORT, CT 06880	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY <hr/> Contributor address; City; State; Zip Code WESTPORT, CT 06880	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY <hr/> Contributor address; City; State; Zip Code WESTPORT, CT 06880	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY <hr/> Contributor address; City; State; Zip Code WESTPORT, CT 06880	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2292/4629 Rpt: 2295/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY	7 Amount of Contribution (\$) \$20.24
6 Contributor address; City; State; Zip Code WESTPORT, CT 06880		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, GERRY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WESTPORT, CT 06880		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, LORAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOSTON, MA 02118		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF MASSACHUSETTS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANG, SUSAN (SUE)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ASHEVILLE, NC 28803		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGAN, SUSAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WINNETKA, IL 60093		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) ACTIVE ALLIANCE COUNSELING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2293/4629 Rpt: 2296/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGARI, REZA <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77841-2977	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TAMU
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGARI, REZA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77841-2977	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TAMU
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGARI, REZA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77841-2977	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TAMU
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGE, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) ARIEL HOLDINGS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGE, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT RESEARCH		Employer (See Instructions) ARIEL EQUITES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2294/4629 Rpt: 2297/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGE, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROJECT RESEARCH		9 Employer (See Instructions) ARIEL EQUITES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGER, DR LISA <hr/> Contributor address; City; State; Zip Code LLOYD NECK, NY 11743	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLINICAL PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGERMAN, JESSICA <hr/> Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEXTILE ARTIST		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGERMAN, JESSICA <hr/> Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEXTILE ARTIST		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGFELD, CHRIS <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2295/4629 Rpt: 2298/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGFELD, CHRIS <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGFORD, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGFORD, MARY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) COURT STREET COFFEE SHOP LLC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGFORD, MARY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) COURT STREET COFFEE SHOP LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGHORNE, WEBSTER L <hr/> Contributor address; City; State; Zip Code COLLEGE PARK, GA 30349	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2296/4629 Rpt: 2299/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGHORNE, WEBSTER L <hr/> 6 Contributor address; City; State; Zip Code COLLEGE PARK, GA 30349	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) N/A
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGHORNE, WEBSTER L <hr/> Contributor address; City; State; Zip Code COLLEGE PARK, GA 30349	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGLINAIS, NEVYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGMAN, CLAUDIA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60647	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGMAN, CLAUDIA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60647	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2297/4629 Rpt: 2300/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGMAN, CLAUDIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code CHICAGO, IL 60647		
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGROCK, AMY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code EAST WINDSOR, NJ 08520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGROCK, AMY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code EAST WINDSOR, NJ 08520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGROCK, AMY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code EAST WINDSOR, NJ 08520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGROCK, AMY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code EAST WINDSOR, NJ 08520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2298/4629 Rpt: 2301/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGROCK, AMY	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code EAST WINDSOR, NJ 08520		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGSTON, AILEEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11217		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NYU
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGTREE, JOHN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANIER, JIMMY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MCKESSON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANIER, JIMMY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MCKESSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2299/4629 Rpt: 2302/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANIER, JIMMY <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) MCKESSON
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANIER, JIMMY <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MCKESSON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANNEN, ELEANOR <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94595	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANOUE, MICHELE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77041	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) HEADWORKS INTERNATIONAL, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANSDOWNE, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2300/4629 Rpt: 2303/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANSDOWNNE, PAUL <hr/> 6 Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANTHEAUME, BETH <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ATASCADEROUSD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANTHEAUME, BETH <hr/> Contributor address; City; State; Zip Code PASO ROBLES, CA 93446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ATASCADEROUSD
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANTZ, TARRAH <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANTZ, TARRAH <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2301/4629 Rpt: 2304/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPAGLIA, NANCY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code PORTLAND, OR 97215		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPE, KYLE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) IBM
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPE, KYLE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) IBM
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPE, KYLE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) IBM
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPOINTE, ELAINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code QUINCY, MA 02169		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2302/4629 Rpt: 2305/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPOMA, GAYLE <hr/> 6 Contributor address; City; State; Zip Code SUCCASUNNA, NJ 07876	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPP, JAN <hr/> Contributor address; City; State; Zip Code MINNETONKA, MN 55305	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASST.		Employer (See Instructions) WINTHROP & WEINSTINE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPPIN, JAMES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAPPIN, JAMES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARA, JOHNNY <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) LOCATION PROXIMITY NETWORK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2303/4629 Rpt: 2306/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARA, JOHNNY	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code BEAUMONT, TX 77702	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) LOCATION PROXIMITY NETWORK
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARA, ORLANDO	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code SPRING, TX 77388	
Principal occupation / Job title (See Instructions) DOCTORAL CANDIDATE		Employer (See Instructions) UC IRVINE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARA, ORLANDO	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code SPRING, TX 77388	
Principal occupation / Job title (See Instructions) DOCTORAL CANDIDATE		Employer (See Instructions) UC IRVINE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARCADE, MARGARET	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARKIN, PATRICK	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	
Principal occupation / Job title (See Instructions) PROFESSOR (CHEMISTRY)		Employer (See Instructions) TEXAS A&M UNIVERSITY-CORPUS CHRISTI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2304/4629 Rpt: 2307/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARKIN, PATRICK <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) PROFESSOR (CHEMISTRY)		9 Employer (See Instructions) TEXAS A&M UNIVERSITY-CORPUS CHRISTI
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARKIN, ROBYN <hr/> Contributor address; City; State; Zip Code PAOLI, PA 19301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) CENTRAL CARIBBEAN MARINE INSTITUTE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARKIN, ROBYN <hr/> Contributor address; City; State; Zip Code PAOLI, PA 19301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) CENTRAL CARIBBEAN MARINE INSTITUTE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARKWORTHY, SHARON <hr/> Contributor address; City; State; Zip Code SPRING, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAROSE, DAVID <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55405	Amount of Contribution (\$) \$1,024.00
Principal occupation / Job title (See Instructions) CHIEF SCIENTIST		Employer (See Instructions) CARNEGIE ROBOTICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2305/4629 Rpt: 2308/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSEN, ALBERTA <hr/> 6 Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSEN, TRACY <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSON, ESTHER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75227-2940	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSON, JUDITH <hr/> Contributor address; City; State; Zip Code NEW CANAAN, CT 06840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARSON, JUDITH <hr/> Contributor address; City; State; Zip Code NEW CANAAN, CT 06840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2306/4629 Rpt: 2309/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARTEY, EMMANUEL <hr/> 6 Contributor address; City; State; Zip Code STONE MOUNTAIN, GA 30087	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) EMORY UNIVERSITY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARTEY, EMMANUEL <hr/> Contributor address; City; State; Zip Code STONE MOUNTAIN, GA 30087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) EMORY UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARUE, YVONNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LASALLE, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LASCH, MEGAN AND <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) O-SDA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2307/4629 Rpt: 2310/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LASSETER, GARY <hr/> 6 Contributor address; City; State; Zip Code ROBINSON, TX 76706	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LASSITER, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LASSITER LAW
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LASSWELL, JOAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATIF, PERNIA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATIF, PERNIA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2308/4629 Rpt: 2311/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATIMER, CLIFF <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90027	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATOURE, MARK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATTIMORE, MARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATTIMORE, RACHEL <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CROPLIFE AMERICA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBACH, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2309/4629 Rpt: 2312/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBE, ERIC	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071		
8 Principal occupation / Job title (See Instructions) CONSTRUCTION		9 Employer (See Instructions) ERIC LAUBE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBE, ERIC	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75071		
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) ERIC LAUBE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBER, HELENANN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUDADIO, ROBERT	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code HARRISON, NJ 07029		
Principal occupation / Job title (See Instructions) CYBERSECURITY ANALYST		Employer (See Instructions) JP MORGAN CHASE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUDADIO, ROBERT	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code HARRISON, NJ 07029		
Principal occupation / Job title (See Instructions) CYBERSECURITY ANALYST		Employer (See Instructions) JP MORGAN CHASE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2310/4629 Rpt: 2313/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77079	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		9 Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2311/4629 Rpt: 2314/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77079	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		9 Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, EHREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER III		Employer (See Instructions) THE EMPLOYMENT SOLUTION (TES)- CONTRACTED TO
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2312/4629 Rpt: 2315/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		9 Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUGHLIN, GINNY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUMER, DIANE <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2313/4629 Rpt: 2316/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUREANO, JONATHON <hr/> 6 Contributor address; City; State; Zip Code NORTH PLAINFIELD, NJ 07062	7 Amount of Contribution (\$) \$3.58
8 Principal occupation / Job title (See Instructions) PRODUCER		9 Employer (See Instructions) MLB NETWORK
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUREANO, JONATHON <hr/> Contributor address; City; State; Zip Code NORTH PLAINFIELD, NJ 07062	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) PRODUCER		Employer (See Instructions) MLB NETWORK
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAURENT, MELISSA <hr/> Contributor address; City; State; Zip Code WINNSBORO, TX 75494	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VETERANS SERVICE OFFICER		Employer (See Instructions) WOOD COUNTY
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAURENT, MELISSA <hr/> Contributor address; City; State; Zip Code WINNSBORO, TX 75494	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VETERANS SERVICE OFFICER		Employer (See Instructions) WOOD COUNTY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVELY, ANDREA E. <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77713	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) A.E.LAVELY\$ ASSOC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2314/4629 Rpt: 2317/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVENDRA KUMAR, BHARATH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78741	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVIANA, SHELLEY <hr/> Contributor address; City; State; Zip Code LATHAM, NY 12110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ANTHEM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVINE, STEVE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVIOLETTE, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVIOLETTE, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2315/4629 Rpt: 2318/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVIOLETTE, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78733	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NONE		9 Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW, DAVID <hr/> Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW, LEONARD <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAW, PAM <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95401	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) COMMUNITY SUPPORT NETWORK
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWLOR, BONNIE <hr/> Contributor address; City; State; Zip Code NORTH BEND, WA 98045	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2316/4629 Rpt: 2319/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, AMY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code MURPHY, TX 75094		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, AMY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code MURPHY, TX 75094		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, EILEEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, EILEEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, FRED	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WAQUOIT, MA 02536		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2317/4629 Rpt: 2320/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, KELLY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, MIKE <hr/> Contributor address; City; State; Zip Code PLANTATION, FL 33317	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, WESLEY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79934	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, WESLEY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79934	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2318/4629 Rpt: 2321/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, WESLEY <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79934	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, WESLEY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79934	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, ABIGAIL <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, GLORIA <hr/> Contributor address; City; State; Zip Code SAN LUIS OBISPO, CA 93405	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, REVLYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2319/4629 Rpt: 2322/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWTON, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code PALMER, AK 99645	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWTON, VIRGINIA <hr/> Contributor address; City; State; Zip Code PALMER, AK 99645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYDEN, MARSHA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPTICIAN		Employer (See Instructions) RETIRED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYIWOLA, FEMK <hr/> Contributor address; City; State; Zip Code RANCHO VIEJO, TX 78575	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYMAN, EVE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2320/4629 Rpt: 2323/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYNE, LINDA <hr/> 6 Contributor address; City; State; Zip Code CRETE, IL 60417	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYTON, PEGGY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYTON, PEGGY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYTON, PEGGY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAYTON, PEGGY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2321/4629 Rpt: 2324/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAZARD, PAMELA <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FINANCIAL ACCOUNTING ANALYST		9 Employer (See Instructions) CHEVRON
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAZAROWICZ, KATIE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAZZARINI, JUDITH <hr/> Contributor address; City; State; Zip Code SANTA MARIA, CA 93454	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LE, ALEX <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) AVEO ONCOLOGY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LE, KENNETH <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) TOWNSEN MEMORIAL HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2322/4629 Rpt: 2325/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LE, MAI <hr/> 6 Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) APPLE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LE, MAI <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) APPLE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LE, NGUYEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77072	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) WINNING AGENCY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LE BLANC, DONNA <hr/> Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92648	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEACH, JACQUELINE <hr/> Contributor address; City; State; Zip Code SCITUATE, MA 02066	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2323/4629 Rpt: 2326/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEACH, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code SCITUATE, MA 02066	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEACH, JACQUELINE <hr/> Contributor address; City; State; Zip Code SCITUATE, MA 02066	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEACH, LESLIE <hr/> Contributor address; City; State; Zip Code REDLANDS, CA 92374	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEACH, LESLIE <hr/> Contributor address; City; State; Zip Code REDLANDS, CA 92374	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAF, ERIKA <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2324/4629 Rpt: 2327/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAF, ERIKA <hr/> 6 Contributor address; City; State; Zip Code EUGENE, OR 97405	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAGUE, KARRIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, FRANCESCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, FRANCESCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) TEXAS BLUE ACTION
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, FRANCESCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2325/4629 Rpt: 2328/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, FRANCESCA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, FRANCESCA FRAGA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, FRANCESCA FRAGA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAHY, JOHN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETER		Employer (See Instructions) BRIGHTBUOY MARKETING
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAKE, CAROL <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2326/4629 Rpt: 2329/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAKE, CAROL <hr/> 6 Contributor address; City; State; Zip Code NEW ORLEANS, LA 70118	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAKE, DAVID <hr/> Contributor address; City; State; Zip Code KANEOHE, HI 96744	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UH CENTER ON DISABILITY STUDIES
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAKE, DAVID <hr/> Contributor address; City; State; Zip Code KANEOHE, HI 96744	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UH CENTER ON DISABILITY STUDIES
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAKE, DAVID <hr/> Contributor address; City; State; Zip Code KANEOHE, HI 96744	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UH CENTER ON DISABILITY STUDIES
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL, CHRIS <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DALLAS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2327/4629 Rpt: 2330/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL, CHRIS <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75202	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DALLAS ISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) ALMAMIA HEALTH SERVICES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2328/4629 Rpt: 2331/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAL-MCBRIDE, M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAP, NANCY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QA SUPPORT		Employer (See Instructions) CPAT GLOBAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2329/4629 Rpt: 2332/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAP, NANCY <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) QA SUPPORT		9 Employer (See Instructions) CPAT GLOBAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARD, KRISTEN <hr/> Contributor address; City; State; Zip Code TULSA, OK 74133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) ONEOK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARNER, LAURA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) RISING MEDICAL SOLUTIONS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARNER, LAURA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) UX DESIGNER		Employer (See Instructions) RISING MS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, KATHLEEN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2330/4629 Rpt: 2333/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code MADISON, WI 53705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, PATRICIA <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, PATRICIA <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, PATRICIA <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34120	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, PATRICIA <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2331/4629 Rpt: 2334/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEARY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code NAPLES, FL 34120	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEATHERWOOD, ROB <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MEMBERSHIP/PAC DIRECTOR		Employer (See Instructions) TEXAS FUNERAL DIRECTORS ASSOCIATION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVER, SYLVIA G <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVER, SYLVIA G <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27517	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVER, SYLVIA G <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27517	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2332/4629 Rpt: 2335/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVITT, NAOMI <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, MA 02476	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVITT, STEPHANIE <hr/> Contributor address; City; State; Zip Code BELMONT, CA 94002	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVITT, STEPHANIE <hr/> Contributor address; City; State; Zip Code BELMONT, CA 94002	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVUE, THERESA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) LAKE TRAVIS ISD
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVUE, THERESA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) LAKE TRAVIS ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2333/4629 Rpt: 2336/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEAVUE, THERESA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78733	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		9 Employer (See Instructions) LAKE TRAVIS ISD
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBAILLIF, LISETTE <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) AMERICAN AIRLINES
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBAILLIF, LISETTE <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) AMERICAN AIRLINES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBED, HOLLY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBIT, HERMANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR GEOLOGICAL ADVISOR		Employer (See Instructions) CAMAC ENERGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2334/4629 Rpt: 2337/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBSACK, DENNIS <hr/> 6 Contributor address; City; State; Zip Code LOVELAND, CO 80538	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEBSACK, DENNIS <hr/> Contributor address; City; State; Zip Code LOVELAND, CO 80538	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LECHNIAK, NIKI <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VIDEO PRODUCER		Employer (See Instructions) CITY OF LOUISVILLE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LECLAIR, KATE <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DOULA		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDBETTER, CHERYL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2335/4629 Rpt: 2338/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDBETTER, CHERYL <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDBETTER, DEBORAH <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDERER, ROBIN <hr/> Contributor address; City; State; Zip Code DALAS, TX 75201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDERMAN, EVELYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDFERD, ERICKA <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2336/4629 Rpt: 2339/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDFERD, ERICKA <hr/> 6 Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDLOW, SPENCER <hr/> Contributor address; City; State; Zip Code INGRAM, TX 78025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDLOW, SPENCER <hr/> Contributor address; City; State; Zip Code INGRAM, TX 78025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDNUM, CONNIE <hr/> Contributor address; City; State; Zip Code WEBSTER, TX 77598	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) FILMS		Employer (See Instructions) CONNIE LEDNUM
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, ALICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) COMMISSIONER BRIONES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2337/4629 Rpt: 2340/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, ALICE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHIEF OF STAFF		9 Employer (See Instructions) COMMISSIONER BRIONES
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, ALICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) COMMISSIONER BRIONES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, BERNICE <hr/> Contributor address; City; State; Zip Code SEWICKLEY, PA 15143	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED CONSULTANT		Employer (See Instructions) EVERGREEN MGT
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CHAO CHIUNG <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ARCHITECTS		Employer (See Instructions) STOA ARCHITECTS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CHAO-CHIUNG <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) STOA ARCHITECTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2338/4629 Rpt: 2341/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code NEWTON, MA 02459	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		9 Employer (See Instructions) MGH AND MSKCC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CLARA <hr/> Contributor address; City; State; Zip Code PACIFICA, CA 94044-4016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) SPLUNK INC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CRAIG <hr/> Contributor address; City; State; Zip Code IRVING, TX 75038-4107	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) TRAINING SPECIALIST		Employer (See Instructions) CITY ELECTRIC SUPPLY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CRAIG <hr/> Contributor address; City; State; Zip Code IRVING, TX 75038-4107	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) TRAINING SPECIALIST		Employer (See Instructions) CITY ELECTRIC SUPPLY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CRAIG <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76018-1080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TRAINING ADMINISTRATOR		Employer (See Instructions) CITY ELECTRIC SUPPLY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2339/4629 Rpt: 2342/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CRAIG <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76018-1080	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TRAINING ADMINISTRATOR		9 Employer (See Instructions) CITY ELECTRIC SUPPLY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, D. <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, DEBBIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) HISD
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, DEBBIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) HISD
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, DEBBIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) HISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2340/4629 Rpt: 2343/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90012	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) STATE OF CALIFORNIA, SECOND DISTRICT COURT OF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, EDWARD <hr/> Contributor address; City; State; Zip Code NORTHRIDGE, CA 91324	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) PROVIDENCE HEALTH
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, GERALD W. <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) ANDRADE - VAN DE PUTTE & ASSOCIATES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JEANNINE <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) AGREEYA SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2341/4629 Rpt: 2344/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JENNIE <hr/> 6 Contributor address; City; State; Zip Code PARKERSBURG, WV 26101-7234	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JENNIFER <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JENNIFER <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JENNIFER <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JENNIFER <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2342/4629 Rpt: 2345/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JOHN <hr/> 6 Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33312	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, JULIE <hr/> Contributor address; City; State; Zip Code DENVER, CO 80218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, KEUN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DIVERSIFIED ELECTRICAL SOLUTIONS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, KEUN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DIVERSIFIED ELECTRICAL SOLUTIONS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, KEUN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) DIVERSIFIED ELECTRICAL SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2343/4629 Rpt: 2346/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, KUAN HSIEN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE MANAGER		9 Employer (See Instructions) KUAN HSIEN LEE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, MARLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CONSILIO LEGAL SERVICES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, RACHEL <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90403	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, ROBERT <hr/> Contributor address; City; State; Zip Code BAY CITY, TX 77414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF-EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, RODNEY <hr/> Contributor address; City; State; Zip Code SAGINAW, TX 76131	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) DISTRICT ATTENDANCE OFFICER		Employer (See Instructions) ARLINGTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2344/4629 Rpt: 2347/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, RODNEY <hr/> 6 Contributor address; City; State; Zip Code SAGINAW, TX 76131	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) DISTRICT ATTENDANCE OFFICER		9 Employer (See Instructions) ARLINGTON ISD
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, SABRINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, SANDRA <hr/> Contributor address; City; State; Zip Code KENNEDALE, TX 76060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSTABLE		Employer (See Instructions) TARRANT COUNTY
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, SANDRA <hr/> Contributor address; City; State; Zip Code KENNEDALE, TX 76060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TRUANCY OFFICER		Employer (See Instructions) MANSFIELD ISD
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, SANDRA <hr/> Contributor address; City; State; Zip Code KENNEDALE, TX 76060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TRUANCY OFFICER		Employer (See Instructions) MANSFIELD ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2345/4629 Rpt: 2348/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, SANDRA <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401-3305	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, SUZANNE <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02111-1585	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, TINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENERGY ASSET MANAGER		Employer (See Instructions) RECURVE ENERGY ASSET MGMT
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, TING WHAI <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, WARREN <hr/> Contributor address; City; State; Zip Code HOLLYWOOD, FL 33020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2346/4629 Rpt: 2349/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, ZACHARY	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code LA PORTE, TX 77571	
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HARRIS COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE-BRYANT, HELEN	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	
Principal occupation / Job title (See Instructions) SELF EMPLOYED BOOKKEEPER		Employer (See Instructions) HELEN LEE-BRYANT BOOKKEEPING SERVICE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEEF, KAREN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78746	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEEF, KAREN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78746	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEEMAN, LAURA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2347/4629 Rpt: 2350/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEEWIS, KEITH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ARLINGTON HEIGHTS, IL 60005		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEEWIS, KEITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON HEIGHTS, IL 60005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFEVRE, RUTH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EUGENE, OR 97405		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFFORGE, NAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77079		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFFORGE, NAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77079		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2348/4629 Rpt: 2351/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFFORGE, NAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77079	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPUST		9 Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFFORGE, NAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPUST		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFFORGE, NAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPUST		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEFFORGE, NAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPUST		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMAN, EUGENE <hr/> Contributor address; City; State; Zip Code CENTERVILLE, OH 45459	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2349/4629 Rpt: 2352/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMAN, JULIA <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76205-6965	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMAN, PHYLLIS <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33181	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMAN, PHYLLIS <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33181	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMANN, DELPHINE <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039-8517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMEIER, THOMAS <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2350/4629 Rpt: 2353/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHMEIER, THOMAS <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHRER, SANDER <hr/> Contributor address; City; State; Zip Code OCEANSIDE, NY 11572	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHRER, SANDER <hr/> Contributor address; City; State; Zip Code OCEANSIDE, NY 11572	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHTINEN, STEVE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REGIONAL SCIENTIFIC DIRECTOR		Employer (See Instructions) MERCH RESEARCH LABS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEHTINEN, STEVE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REGIONAL SCIENTIFIC DIRECTOR		Employer (See Instructions) MERCH RESEARCH LABS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2351/4629 Rpt: 2354/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEI, HAOXUAN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77095		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) CROWN CASTLE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEI, YUANYUAN	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code SEATTLE, WA 98119		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MICROSOFT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEI, YUANYUAN	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code SEATTLE, WA 98119		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MICROSOFT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBER, DEBORAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBER, DEBORAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2352/4629 Rpt: 2355/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBER, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBER, DEBORAH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBER, DEBORAH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBERT, ALESSIA <hr/> Contributor address; City; State; Zip Code EDINA, MN 55410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) STATE OF MN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIBOWITZ, DAVID <hr/> Contributor address; City; State; Zip Code BALLSTON LAKE, NY 12019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2353/4629 Rpt: 2356/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEICHER, DOROTHEA <hr/> 6 Contributor address; City; State; Zip Code COLUMBIA CROSS ROADS, PA 16914	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEICHER, DOROTHEA <hr/> Contributor address; City; State; Zip Code COLUMBIA CROSS ROADS, PA 16914	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEICHER, DOROTHEA <hr/> Contributor address; City; State; Zip Code COLUMBIA CROSS ROADS, PA 16914	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEICHT, LIZ <hr/> Contributor address; City; State; Zip Code SCOTCH PLAINS, NJ 07076	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) IBM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGH, MICAH <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77742	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2354/4629 Rpt: 2357/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGH, MICAH <hr/> 6 Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGH, MICAH <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGH, MICAH <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGH, MICAH <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIGHTY, WILLIAM <hr/> Contributor address; City; State; Zip Code JUNEAU, AK 99802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2355/4629 Rpt: 2358/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIMANIS, MARGARETE H.	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code PORTLAND, OR 97209		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIMANIS, MARGARETE H.	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code PORTLAND, OR 97209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEIMER, KERRY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MAKAWAO, HI 96768		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEINBERGER, SUSAN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code IRVINE, CA 92606		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEININGER, JOEL	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2356/4629 Rpt: 2359/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEITCH, HOLLY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77030	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAITRE, RAFAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAN, DAVID <hr/> Contributor address; City; State; Zip Code ELLENSBURG, WA 98926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAN, DAVID <hr/> Contributor address; City; State; Zip Code ELLENSBURG, WA 98926	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAY, RACHEL <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE LEMAY FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2357/4629 Rpt: 2360/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAY, RACHEL <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) THE LEMAY FIRM
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAYPATTEN, MICHELLE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) BOOKSELLER		Employer (See Instructions) BARNES AND NOBLE
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMAYPATTEN, MICHELLE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) BOOKSELLER		Employer (See Instructions) BARNES AND NOBLE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMING, JAMES <hr/> Contributor address; City; State; Zip Code NEW BERLIN, WI 53146	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMLEY, AUDREY <hr/> Contributor address; City; State; Zip Code WHITE SALMON, WA 98672-0685	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) SATURNO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2358/4629 Rpt: 2361/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMM, HELEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2359/4629 Rpt: 2362/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code KATY, TX 77449-7504		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2360/4629 Rpt: 2363/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code KATY, TX 77449-7504		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code KATY, TX 77449-7504		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2361/4629 Rpt: 2364/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449-7504	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2362/4629 Rpt: 2365/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449-7504	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMMOND, BYRON <hr/> Contributor address; City; State; Zip Code KATY, TX 77449-7504	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMONS, JEANIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMONS FILHO, LUCIANO <hr/> Contributor address; City; State; Zip Code ENGLEWOOD, CO 80113-1701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) NJ HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2363/4629 Rpt: 2366/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMOS FILHO, LUCIANO <hr/> 6 Contributor address; City; State; Zip Code ENGLEWOOD, CO 80113-1701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) NJ HEALTH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENDZIOSZEK, ANGELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH ISD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENDZIOSZEK, ANGELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH ISD
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENDZIOSZEK, ANGELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENKOWSKY, STEVEN <hr/> Contributor address; City; State; Zip Code NORWALK, CT 06851	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2364/4629 Rpt: 2367/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENNON, CHERYL <hr/> 6 Contributor address; City; State; Zip Code BRISTOL, WI 53104-9303	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENNON, CHERYL <hr/> Contributor address; City; State; Zip Code BRISTOL, WI 53104-9303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENTZ, JASON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) VISTA RESIDENTIAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LENTZ, SARAH V <hr/> Contributor address; City; State; Zip Code WEAVERVILLE, NC 28787	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) LANDLADY		Employer (See Instructions) LENTZ PROPERTIES INC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEON, IVAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2365/4629 Rpt: 2368/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEON, IVANA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77068	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) SENIOR MANAGER		9 Employer (See Instructions) PIONEER WORKS
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, STACY <hr/> Contributor address; City; State; Zip Code COMFORT, TX 78013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD, STEVE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$107.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEONARD MD, CHARLES F <hr/> Contributor address; City; State; Zip Code STOUGHTON, MA 02072	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) SELF-EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEOS, CAROL <hr/> Contributor address; City; State; Zip Code LINDALE, TX 75771	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2366/4629 Rpt: 2369/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEPAK, MICHAEL	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
8 Principal occupation / Job title (See Instructions) SECURITY		9 Employer (See Instructions) ALLIED UNIVERSAL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEPAK, MICHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEPAK, MICHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEPAK, MICHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) SECURITY		Employer (See Instructions) ALLIED UNIVERSAL
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEPORE, LAWRENCE	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code POMPTON LAKES, NJ 07442		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2367/4629 Rpt: 2370/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEPORE, LAWRENCE <hr/> 6 Contributor address; City; State; Zip Code POMPTON LAKES, NJ 07442	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, RAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, RAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, RAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, RAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2368/4629 Rpt: 2371/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERMA, RAUL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79925		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERVISIT, WOOT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75243		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LERVISIT, WOOT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75243		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESETEN, MICHAEL	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESKY, CYNTHIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2369/4629 Rpt: 2372/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESKY, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESLEY, PATSY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) LESLEY & ASSOCIATES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESLIE, VIRGINIA <hr/> Contributor address; City; State; Zip Code CUMMING, GA 30041	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESLIE, VIRGINIA <hr/> Contributor address; City; State; Zip Code CUMMING, GA 30041	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESLIE, VIRGINIA <hr/> Contributor address; City; State; Zip Code CUMMING, GA 30041	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2370/4629 Rpt: 2373/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESLIE, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code CUMMING, GA 30041	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESTER, BRIGID <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESTER, BRIGID <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESTER, BRIGID <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESTER, BRIGID <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2371/4629 Rpt: 2374/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESTER, JOHN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code KIHEI, HI 96753		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESTER, RUSSELL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LINTON, IN 47441		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LETSON, JANETTE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAKEWOOD, CO 80226		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEUNES, JUDY	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) PRESIDENT OF A NON-PROFIT		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEUNES, JUDY	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) PRESIDENT OF A NON-PROFIT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2372/4629 Rpt: 2375/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEUNES, JUDY <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845-8450	7 Amount of Contribution (\$) \$259.87
8 Principal occupation / Job title (See Instructions) PRESIDENT OF A NON-PROFIT		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVAK, ANNA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) MINI JAKE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVEILLE, MARLEE <hr/> Contributor address; City; State; Zip Code CUMBERLAND COUNTY, ME 04108	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SALESFORCE ADMINISTRATOR		Employer (See Instructions) HEALTH CATALYST
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVENTRY, NANCY <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60540-6352	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVERING, STEPHEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) TEXAS CHRISTIAN UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2373/4629 Rpt: 2376/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVI, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, MA 02476-8107	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVI, MICHAEL <hr/> Contributor address; City; State; Zip Code ARLINGTON, MA 02476-8107	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVI, MICHAEL <hr/> Contributor address; City; State; Zip Code ARLINGTON, MA 02476	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVIN, ANDREA <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645-2447	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVIN, BENY <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020-1594	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2374/4629 Rpt: 2377/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVIN, BENY <hr/> 6 Contributor address; City; State; Zip Code AZLE, TX 76020-1594	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVIN, ELISA <hr/> Contributor address; City; State; Zip Code HAILEY, ID 83333	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINE, BEN <hr/> Contributor address; City; State; Zip Code CALABASAS, CA 91302-1597	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRUSTEE		Employer (See Instructions) DST
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINE, JOYCE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TUTOR		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINE, JOYCE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TUTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2375/4629 Rpt: 2378/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINSON, PATRICE <hr/> 6 Contributor address; City; State; Zip Code FAIRFAX, VA 22032	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		9 Employer (See Instructions) GEORGE MASON UNIVERSITY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINSON, PATRICE <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) GEORGE MASON UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINSON, REBECCA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINSON, REBECCA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVINSON, REBECCA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2376/4629 Rpt: 2379/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITHAN, SARAH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) SAVE THE DAY CONSULTING, LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2377/4629 Rpt: 2380/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> 6 Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVITON, ANN <hr/> Contributor address; City; State; Zip Code FORT COLLINS, CO 80525	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, ALENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, ALENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2378/4629 Rpt: 2381/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, ALENE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77025	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, ALENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, EUGENE <hr/> Contributor address; City; State; Zip Code BAY SHORE, NY 11706	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, EUGENE H <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, EUGENE H <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2379/4629 Rpt: 2382/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, EUGENE H <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) RICE UNIVERSITY
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, HARRY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) THE LEVY COMPANY, INC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, HARRY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) THE LEVY COMPANY, INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, JONATHAN <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22032	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT DIRECTOR		Employer (See Instructions) COGNIZANT
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, LISA <hr/> Contributor address; City; State; Zip Code HOBOKEN, NJ 07030	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) VP, SALES		Employer (See Instructions) ROBBINS ENTERTAINMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2380/4629 Rpt: 2383/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, RACHAEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVY, SARAH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92104	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BENEFITS ADMIN		Employer (See Instructions) CITY OF SAN DIEGO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEW, RICHARD <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94608	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) COMPASSPOINT
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEW, RICHARD <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94608	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) COMPASSPOINT
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEW, RICHARD <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94608	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) COMPASSPOINT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2381/4629 Rpt: 2384/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, CAROL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS SOUTHERN UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, CHARLES <hr/> Contributor address; City; State; Zip Code ELKHART, TX 75839	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, CHERYL <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, DAVID <hr/> Contributor address; City; State; Zip Code ANNANDALE, VA 22003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, DAVID <hr/> Contributor address; City; State; Zip Code ANNANDALE, VA 22003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2382/4629 Rpt: 2385/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, ERIC <hr/> 6 Contributor address; City; State; Zip Code BURBANK, CA 91505	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) OPERATIONS MANAGEMENT		9 Employer (See Instructions) NBC UNIVERSAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, ERIC <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPERATIONS MANAGEMENT		Employer (See Instructions) NBC UNIVERSAL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, GLENN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY/PARTNER		Employer (See Instructions) LINEBARGER GOGGAN BLAIR & SAMPSON LLP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, IRA W <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MATHEMATICS PROFESSOR		Employer (See Instructions) TEXAS TECH UNIVERSITY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, IRA W <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MATHEMATICS PROFESSOR		Employer (See Instructions) TEXAS TECH UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2383/4629 Rpt: 2386/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, IRA W <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MATHEMATICS PROFESSOR		9 Employer (See Instructions) TEXAS TECH UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, JAMES <hr/> Contributor address; City; State; Zip Code FALMOUTH, ME 04105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, JUDITH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 91606	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, JUDITH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 91606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, KATHERINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287-2971	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) TCP REALTY SERVICES LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2384/4629 Rpt: 2387/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MADELON <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97202	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MADELON <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MARCI <hr/> Contributor address; City; State; Zip Code GILBERT, AZ 85298	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUCCESS SPECIALIST		Employer (See Instructions) BIG IDEAS LEARNING
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MARGARET <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MARGARET <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2385/4629 Rpt: 2388/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code LOCKHART, TX 78644	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ACCOUNT EXECUTIVE		9 Employer (See Instructions) WALKME
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, MIKE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DJ		Employer (See Instructions) KPFT
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, NANCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703-1759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RHONDA <hr/> Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46254	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RICHARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIV. OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2386/4629 Rpt: 2389/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RICHARD <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78738	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNIV. OF TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, SARAH <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) TEXAS BLUE ACTION DEMOCRATS
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, SARAH <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) TEXAS BLUE ACTION DEMOCRATS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, SEAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR OF IT		Employer (See Instructions) ARCIS GOLF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2387/4629 Rpt: 2390/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, SEAN <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OF IT		9 Employer (See Instructions) ARCIS GOLF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, SHARAI <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, TRACEY <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, TRACEY <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, WESLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) LEWIS COMMERCIAL REALTY, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2388/4629 Rpt: 2391/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code COALINGA, CA 93210-1842	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEXTON, LAUREN <hr/> Contributor address; City; State; Zip Code ENCINO, CA 91436	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEXTON, LAUREN <hr/> Contributor address; City; State; Zip Code ENCINO, CA 91436	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEXTON, LAUREN <hr/> Contributor address; City; State; Zip Code ENCINO, CA 91436	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEZAMA, ROSAURA <hr/> Contributor address; City; State; Zip Code WINDSOR, CO 80550	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) PRODUCTION DESIGNER FOR FILM AND TV		Employer (See Instructions) CAST AND CREW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2389/4629 Rpt: 2392/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, ANDREW <hr/> 6 Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) ARISTA NETWORKS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, ANDREW <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ARISTA NETWORKS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, ANGELA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$126.00
Principal occupation / Job title (See Instructions) BROKER		Employer (See Instructions) KEY REALTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, CHARLES <hr/> Contributor address; City; State; Zip Code MENOMONEE FALLS, WI 53051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, DA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) NEIGHBORLY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2390/4629 Rpt: 2393/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, DANTING <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77056	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) COO		9 Employer (See Instructions) WAN BRIDGE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, JING <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, KENNETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SOUTHWEST REALTY GROUP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, KENNETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, LONGBIN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) X FUTURE LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2391/4629 Rpt: 2394/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, QI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77056	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ADM SPECIALIST		9 Employer (See Instructions) AEROSOL GAS COMPANY INC.
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, QI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADM SPECIALIST		Employer (See Instructions) AEROSOL GAS COMPANY INC.
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, QINGSONG <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ELONG INTERNATIONAL
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, SHAOCHEN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OCCUPATION		Employer (See Instructions) EMPLOYER
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, SHIBIN <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DATA ARCHITECT		Employer (See Instructions) PCC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2392/4629 Rpt: 2395/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, XIAOQIN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) UT
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, XIAOQIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, XU <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, XU <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, XU <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2393/4629 Rpt: 2396/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, YING <hr/> 6 Contributor address; City; State; Zip Code FREMONT, CA 95539	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI, YING <hr/> Contributor address; City; State; Zip Code FREMONT, CA 95539	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LI TARIM, NANCY J. <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) ROYAL EDU FOUNDATION
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIANG, MALI <hr/> Contributor address; City; State; Zip Code BETHESDA, MD 20817	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIANG, RUIFENG RAY <hr/> Contributor address; City; State; Zip Code MORGANTOWN, WV 26505	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROF		Employer (See Instructions) WVU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2394/4629 Rpt: 2397/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIANG, YONG <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92129	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) VICE PRESIDENT		9 Employer (See Instructions) VICTTEC LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIAO, BING BONNIE <hr/> Contributor address; City; State; Zip Code RIDGEFIELD, NJ 07657	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIBERMAN, ALIDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) FACULTY MEMBER		Employer (See Instructions) SMU
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIBMAN, LESLIE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90049	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) DOUBLELL RANCH PRODS. INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LICKLIDER, JANANN <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2395/4629 Rpt: 2398/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LICKLIDER, JANANN <hr/> 6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIDDELL, AMBER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ORSINGER, NELSON, DOWNING & ANDERSON, LLP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIDDELL, AMBER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ORSINGER, NELSON, DOWNING & ANDERSON, LLP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIDDLE, MELANIE <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STUDENT DEVELOPMENT SPECIALIST		Employer (See Instructions) TEXAS STATE U
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIDZ, JERRY <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97403	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2396/4629 Rpt: 2399/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIEBERMAN, JANE AUBREY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
8 Principal occupation / Job title (See Instructions) HOSTESS		9 Employer (See Instructions) THE FIFTH:FIRESIDE BAR AND PATIO
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIEBERMAN, JANE AUBREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) HOSTESS		Employer (See Instructions) THE FIFTH:FIRESIDE BAR AND PATIO
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIEBERMAN, JANE AUBREY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) HOSTESS		Employer (See Instructions) THE FIFTH:FIRESIDE BAR AND PATIO
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIEBERMAN, NORA	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIEBERMAN, ROBERT	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SOUTH EUCLID, OH 44121		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2397/4629 Rpt: 2400/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIEBERMAN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SOUTH EUCLID, OH 44121	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGHT, LAWRENCE <hr/> Contributor address; City; State; Zip Code MISSION VIEJO, CA 92691	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGHTBODY, DONNA <hr/> Contributor address; City; State; Zip Code LINCOLN, NE 68502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGHTSEY-FORD, MELINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGHTY, MICHAEL <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94611	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) HEALTHCARE CONSTITUENCY DIRECTOR		Employer (See Instructions) BERNIE 2020

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2398/4629 Rpt: 2401/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIGON, GARY <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77429	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILES, CALLIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILES, CALLIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILES, CALLIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILES, CALLIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2399/4629 Rpt: 2402/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILES, CALLIE <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILIEHOLM, ROBERT <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006-4215	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILIEHOLM, ROBERT <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006-4215	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILIEHOLM, ROBERT <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006-4215	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILJESTROM, ALLISON <hr/> Contributor address; City; State; Zip Code JACKSON, WY 83002	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2400/4629 Rpt: 2403/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILJESTROM, ALLISON <hr/> 6 Contributor address; City; State; Zip Code JACKSON, WY 83002	7 Amount of Contribution (\$) \$1.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LILLY, JEFFREY <hr/> Contributor address; City; State; Zip Code FERNDALE, MI 48220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIM, RUSSELL <hr/> Contributor address; City; State; Zip Code CHULA VISTA, CA 91913	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) COMPREHENSIVE PSYCHIATRIC SERVICES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIMA, NATALIE <hr/> Contributor address; City; State; Zip Code BOCA RATON, FL 33498	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) PBCSD
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIMAS JR, FABIAN <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FABIAN LIMAS JR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2401/4629 Rpt: 2404/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIMBAUGH, ED <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75082-2666	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) INNOVATIVE SIGNAL ANALYSIS
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIMBAUGH, ED <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082-2666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) INNOVATIVE SIGNAL ANALYSIS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIMON, DAVID <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIMON, LILY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, CHI-MEI <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SOCIAL SERVICE		Employer (See Instructions) CHINESE COMMUNITY CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2402/4629 Rpt: 2405/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, DAWN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77036	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, DAWN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, IRENE <hr/> Contributor address; City; State; Zip Code NEWPORT COAST, CA 92657	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, JEAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) PRIVATE PRACTICE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, KAN-YI <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ORDER SELECTOR		Employer (See Instructions) DOLLAR TREE AND FAMILY DOLLAR DISTRIBUTION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2403/4629 Rpt: 2406/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, KAN-YI <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77469	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ORDER SELECTOR		9 Employer (See Instructions) DOLLAR TREE AND FAMILY DOLLAR DISTRIBUTION
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, KAN-YI <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ORDER SELECTOR		Employer (See Instructions) DOLLAR TREE AND FAMILY DOLLAR DISTRIBUTION
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, KAN-YI <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ORDER SELECTOR		Employer (See Instructions) DOLLAR TREE AND FAMILY DOLLAR DISTRIBUTION
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, KAN-YI <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ORDER SELECTOR		Employer (See Instructions) DOLLAR TREE AND FAMILY DOLLAR DISTRIBUTION
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIN, STEVEN <hr/> Contributor address; City; State; Zip Code MADISON, AL 35758	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) HIBACHI EXPRESS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2404/4629 Rpt: 2407/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDAHL, SHAWN <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94131	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SECTION ADMIN		9 Employer (See Instructions) MTC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDBLOOM, LARRY <hr/> Contributor address; City; State; Zip Code WILMETTE, IL 60091	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDEN, GREG <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) UC BERKELEY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDIG, JOHANN <hr/> Contributor address; City; State; Zip Code GREELEY, CO 80634	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) J JOHANN LINDIG, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDNER, JOLIE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LAUSD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2405/4629 Rpt: 2408/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDNER, JUDITH <hr/> 6 Contributor address; City; State; Zip Code CINCINNATI, OH 45227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) DATA ENTRY CLERK		9 Employer (See Instructions) FREESTORE FOODBANK
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDNER, JUDITH <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DATA ENTRY CLERK		Employer (See Instructions) FREESTORE FOODBANK
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDNER, JUDITH <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DATA ENTRY CLERK		Employer (See Instructions) FREESTORE FOODBANK
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSAY, CATHLEEN <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSAY, CHRISTINE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2406/4629 Rpt: 2409/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, ROSANNE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, ROSEMARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, ROSEMARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, ROSEMARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, ROSEMARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2407/4629 Rpt: 2410/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINE, BARBARA <hr/> 6 Contributor address; City; State; Zip Code MT CLEMENS, MI 48043	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINEBARGER, DALE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINEBARGER, DALE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINEBAUGH, SHARAN <hr/> Contributor address; City; State; Zip Code JUNCTION, TX 76849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINEBERGER, ERNEST <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CAPACITY PLANNING		Employer (See Instructions) TEXAS INSTRUMENTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2408/4629 Rpt: 2411/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LING, FUYUN <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92127-2807	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINGENFELDER, JOHN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINGLE, LISA <hr/> Contributor address; City; State; Zip Code DAYTON, OH 45429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINK, BENJAMIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH DATA ANALYST		Employer (See Instructions) HCA HEALTHCARE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINK, JACOB <hr/> Contributor address; City; State; Zip Code HEREFORD, TX 79045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) LAUREL STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2409/4629 Rpt: 2412/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINK, JACOB 6 Contributor address; City; State; Zip Code HEREFORD, TX 79045	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE		9 Employer (See Instructions) LAUREL STRATEGIES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINK, MARY Contributor address; City; State; Zip Code ASHFIELD, MA 01330	Amount of Contribution (\$) \$6.83
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINK, PATRICK Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINN, KELBY Contributor address; City; State; Zip Code BRADENTON, FL 34205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OWNER/BROKER		Employer (See Instructions) ACP REAL ESTATE, INC.
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINN, KELBY Contributor address; City; State; Zip Code BRADENTON, FL 34205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OWNER/BROKER		Employer (See Instructions) ACP REAL ESTATE, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2410/4629 Rpt: 2413/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINNELL, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77388	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) BUSINESS MANAGER		9 Employer (See Instructions) EVEREST SYSTEMS
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINNELL, ELIZABETH <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) EVEREST SYSTEMS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINSON, ANDREA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) STATE OF TEXAS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINSON, ANDREA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) STATE OF TEXAS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINSON, ANDREA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2411/4629 Rpt: 2414/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINSON, ANDREA <hr/> 6 Contributor address; City; State; Zip Code HUTTO, TX 78634	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NRS IV		9 Employer (See Instructions) STATE OF TEXAS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINSON, ANDREA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NRS IV		Employer (See Instructions) STATE OF TEXAS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINSTROM, KATHERINE <hr/> Contributor address; City; State; Zip Code GUILFORD, CT 06437	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) MEDIMMUNE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINZI, ANNA T <hr/> Contributor address; City; State; Zip Code NORTH EASTON, MA 02356	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPCHAK, OSCAR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2412/4629 Rpt: 2415/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPMAN, ERIC <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPNICKY, DAVID <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050-1075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MANAGEMENT & PROGRAM ANALYST		Employer (See Instructions) U.S. DEPT. OF LABOR
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPNICKY, DAVID <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050-1075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MANAGEMENT & PROGRAM ANALYST		Employer (See Instructions) U.S. DEPT. OF LABOR
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPNICKY, DAVID <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050-1075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MANAGEMENT & PROGRAM ANALYST		Employer (See Instructions) U.S. DEPT. OF LABOR
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPNICKY, DAVID <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050-1075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MANAGEMENT & PROGRAM ANALYST		Employer (See Instructions) U.S. DEPT. OF LABOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2413/4629 Rpt: 2416/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPP, BARBARA E <hr/> 6 Contributor address; City; State; Zip Code FALLSTON, MD 22047	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPP, BARBARA E <hr/> Contributor address; City; State; Zip Code FALLSTON, MD 21047	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPP, BARBARA E <hr/> Contributor address; City; State; Zip Code FALLSTON, MD 21047	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPSCOMB, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CUSTOMER SUCCESS EXECUTIVE		Employer (See Instructions) BLACKBAUD
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPSCOMB, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR, CUSTOMER SUCCESS		Employer (See Instructions) BLACKBAUD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2414/4629 Rpt: 2417/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPSCOMB, MELISSA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CUSTOMER SUCCESS EXECUTIVE		9 Employer (See Instructions) BLACKBAUD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPSCOMB, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR, CUSTOMER SUCCESS		Employer (See Instructions) BLACKBAUD
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPTON, AVI <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02134	Amount of Contribution (\$) \$5.40
Principal occupation / Job title (See Instructions) PHD STUDENT		Employer (See Instructions) HARVARD UNIVERSITY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPTON, AVI <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02134	Amount of Contribution (\$) \$5.40
Principal occupation / Job title (See Instructions) PHD STUDENT		Employer (See Instructions) HARVARD UNIVERSITY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPTON, ILISE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2415/4629 Rpt: 2418/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPTON, ILISE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75231	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIRA, LEONARD <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SAN JOSE STATE UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIRA, LEONARD <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SAN JOSE STATE UNIVERSITY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISENBY, ANDREW <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER/MILITARY		Employer (See Instructions) CASTLEBERRY ISD/TXARNG
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISENBY, ANDREW <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER/MILITARY		Employer (See Instructions) CASTLEBERRY ISD/TXARNG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2416/4629 Rpt: 2419/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISENBY, ANDREW	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code LUBBOCK, TX 79413		
8 Principal occupation / Job title (See Instructions) TEACHER/MILITARY		9 Employer (See Instructions) CASTLEBERRY ISD/TXARNG
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISOTTA, CHRISTOPHER	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110		
Principal occupation / Job title (See Instructions) STRATEGIST		Employer (See Instructions) GEORGE P JOHNSON
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISOTTA, CHRISTOPHER	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110		
Principal occupation / Job title (See Instructions) STRATEGIST		Employer (See Instructions) GEORGE P JOHNSON
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISOWSKI, ROBERT	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code EDISON, NJ 08820		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISOWSKI, ROBERT	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code EDISON, NJ 08820		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2417/4629 Rpt: 2420/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIST, AMANDA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) ALIST CONSULTING
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LISTER, SIDNEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749-1641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITOFF, ELIOT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$54.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) ELIOT REALTY. INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, HEATHER <hr/> Contributor address; City; State; Zip Code WATAUGA, TX 76148	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AIRLINE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, LEE ANN <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2418/4629 Rpt: 2421/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, RHONDA <hr/> 6 Contributor address; City; State; Zip Code VIDOR, TX 77662	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, RHONDA <hr/> Contributor address; City; State; Zip Code VIDOR, TX 77662	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, WILLIAM <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, WILLIAM <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLEJOHN, MARY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2419/4629 Rpt: 2422/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTMAN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code REISTERSTOWN, MD 21136	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTON, ELAINE <hr/> Contributor address; City; State; Zip Code CARDIFF BY THE SEA, CA 92007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTON, RICHARD <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94598	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITWAK, TAINA <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20878-3556	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SCIENTIFIC ILLUSTRATOR		Employer (See Instructions) US DEPT. OF AGRICULTURE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITWIN, STUART <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2420/4629 Rpt: 2423/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITWIN, STUART	7 Amount of Contribution (\$) \$70.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, ALEX	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code JACKSON HEIGHTS, NY 11372		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) GOOGLE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, AMY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PLEASANTON, CA 94566		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) CSU SACRAMENTO
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, DAN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) SWE		Employer (See Instructions) AMAZON
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, DAN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) SWE		Employer (See Instructions) AMAZON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2421/4629 Rpt: 2424/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, JANET <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, XIAOME <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) STATE OF TEXAS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, XIN <hr/> Contributor address; City; State; Zip Code GRAND PAIRIE, TX 75052	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) ALCON
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIU, YUZH <hr/> Contributor address; City; State; Zip Code VIENNA, VA 22180-3562	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) KPMG LLP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIVINGSTON, EVELYN P <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2422/4629 Rpt: 2425/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLAMAS III, FRANCO <hr/> 6 Contributor address; City; State; Zip Code MADISON, WI 53717	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85224	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85224	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2423/4629 Rpt: 2426/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CHANDLER, AZ 85224		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code CHANDLER, AZ 85224		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, DR. LILLIS	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code CHANDLER, AZ 85224		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, KEN E	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SPRING, TX 77379		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LLOYD, PATRICIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUBURN, WA 98092		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2424/4629 Rpt: 2427/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LO, SK <hr/> 6 Contributor address; City; State; Zip Code EDINA, MN 55439-1018	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LO GIUDICE, RICHARD <hr/> Contributor address; City; State; Zip Code MILLBRAE, CA 94030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) WINDOW WASHER/PRESSURE WASHER		Employer (See Instructions) OWNER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOBO, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKART, ELLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) BSW REHAB
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKART, ELLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) BSW REHAB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2425/4629 Rpt: 2428/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKE, DEBRA	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code BRENTWOOD, TN 37027		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKE, DEBRA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BRENTWOOD, TN 37027		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKE, MEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MCHENRY, IL 60050		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKETT, JEAN	Amount of Contribution (\$) \$145.00
Contributor address; City; State; Zip Code WEATHERFORD, TX 76086		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, BILL	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) MCLENNAN COMMUNITY COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2426/4629 Rpt: 2429/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, BILL <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) MCLENNAN COMMUNITY COLLEGE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, KATHLEEN <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, LOLLY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, LOLLY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, LOLLY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2427/4629 Rpt: 2430/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, MARY B <hr/> 6 Contributor address; City; State; Zip Code ALPINE, TX 79830	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKHART, MARY B <hr/> Contributor address; City; State; Zip Code ALPINE, TX 79830	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKS, DAVID <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60618	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKWOOD, LAURA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEW BRAUNFELS ISD
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LODOLO, GENA <hr/> Contributor address; City; State; Zip Code EDINA, MN 55436	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2428/4629 Rpt: 2431/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LODOLO, GENA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code EDINA, MN 55436		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEB, MARGERY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEB, MARGERY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWEN, COLLIN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77080-7108		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWENSTEIN, BIRGIT ROSE	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code SEDONA, AZ 86336		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2429/4629 Rpt: 2432/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWENSTEIN, BIRGIT ROSE <hr/> 6 Contributor address; City; State; Zip Code SEDONA, AZ 86336	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWENSTEIN, BIRGIT ROSE <hr/> Contributor address; City; State; Zip Code SEDONA, AZ 86336	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWENSTEIN, BIRGIT ROSE <hr/> Contributor address; City; State; Zip Code SEDONA, AZ 86336	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWENSTEIN, BIRGIT ROSE <hr/> Contributor address; City; State; Zip Code SEDONA, AZ 86336	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) LOEWY LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2430/4629 Rpt: 2433/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) LAW		9 Employer (See Instructions) LOEWY LAW FIRM
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) LOEWY LAW FIRM
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) LOEWY LAW FIRM
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) LOEWY LAW FIRM
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOEWY, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAW		Employer (See Instructions) LOEWY LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2431/4629 Rpt: 2434/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTIS, GAIL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) RISD
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTIS, GAIL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON, DYLAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) IDK
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON, DYLAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) IDK
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON, SUZY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) DEPUTY SUPERINTENDENT		Employer (See Instructions) LAGO VISTA ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2432/4629 Rpt: 2435/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON, SUZY <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) DEPUTY SUPERINTENDENT		9 Employer (See Instructions) LAGO VISTA ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON BULLIS, SUZY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DEPUTY SUPERINTENDENT		Employer (See Instructions) LAGO VISTA ISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON BULLIS, SUZY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DEPUTY SUPERINTENDENT		Employer (See Instructions) LAGO VISTA ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, BOB <hr/> Contributor address; City; State; Zip Code CARMEL, NY 10512	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, LAURA <hr/> Contributor address; City; State; Zip Code PAOLI, OK 73074	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) OK DHS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2433/4629 Rpt: 2436/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, LAURA <hr/> 6 Contributor address; City; State; Zip Code PAOLI, OK 73074	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) OK DHS
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, LAURA <hr/> Contributor address; City; State; Zip Code PAOLI, OK 73074	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) OK DHS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, LORI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRINITY UNIVERSITY		Employer (See Instructions) CONTROLLER
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, LORI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRINITY UNIVERSITY		Employer (See Instructions) CONTROLLER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, STEVEN <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) STEVEN A LOGAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2434/4629 Rpt: 2437/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, THAD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGUE, GEORGE <hr/> Contributor address; City; State; Zip Code HURST, TX 76054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOHNES, PETER <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98116	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOIZIDES, LYDIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOMAS, RACHEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CREATIVE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2435/4629 Rpt: 2438/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOMAX, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code DECATUR, GA 30034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) MAXIM HEALTHCARE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOMBARDI, JOANNE <hr/> Contributor address; City; State; Zip Code PHILDELPHIA, PA 19107	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOMBARDI, JOSEPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARINE SURVEYOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, ELIZABETH <hr/> Contributor address; City; State; Zip Code DURANGO, CO 81301-8940	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2436/4629 Rpt: 2439/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code DURANGO, CO 81301-8940	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, FRAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76134-3408	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) STUDENT EMPLOYMENT NAVIGATOR		Employer (See Instructions) TARRANT COUNTY COLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, GAYE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, GAYE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MARK <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CENTRAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2437/4629 Rpt: 2440/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MARK <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) CENTRAL
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MAURI <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) MODERN FAMILY VISION
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MAURI <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) MODERN FAMILY VISION
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MAURI <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) MODERN FAMILY VISION
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MAURI <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) MODERN FAMILY VISION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2438/4629 Rpt: 2441/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, MELISSA <hr/> 6 Contributor address; City; State; Zip Code BLUE SPRINGS, MO 64015	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, STEWART <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87508	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONG, XIAN <hr/> Contributor address; City; State; Zip Code TALLAHASSEE, FL 32309-2586	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) BARTLETT REAL ESTATE GROUP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGDEN, GREGORY <hr/> Contributor address; City; State; Zip Code CORTLANDT MANOR, NY 10567	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGFIELD, AMY <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2439/4629 Rpt: 2442/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGFIELD, AMY <hr/> 6 Contributor address; City; State; Zip Code BELTON, TX 76513	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGFIELD, AMY <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGFIELD, AMY <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGFIELD, AMY <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGFIELD, AMY <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2440/4629 Rpt: 2443/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGLEY, SUSAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PR		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGO, ANTONELLA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) UNT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGO, ANTONELLA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH PROFESSOR		Employer (See Instructions) UNT
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGO, ANTONELLA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) UNT
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGO, ANTONELLA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) UNT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2441/4629 Rpt: 2444/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGO, ANTONELLA <hr/> 6 Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RESEARCH PROFESSOR		9 Employer (See Instructions) UNT
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGO, ANTONELLA <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) UNT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONGORIA, DEANNA <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LONSWAY, PHILIP <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOO, TONY <hr/> Contributor address; City; State; Zip Code SANTA CLARA, CA 95051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2442/4629 Rpt: 2445/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOOBY, JUDTIH <hr/> 6 Contributor address; City; State; Zip Code NORTH FORK, CA 93643	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOOBY, JUDTIH <hr/> Contributor address; City; State; Zip Code NORTH FORK, CA 93643	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOOS, CAROLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2443/4629 Rpt: 2446/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, ALICIA <hr/> 6 Contributor address; City; State; Zip Code FONTANA, CA 92376	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, ANGEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, ART <hr/> Contributor address; City; State; Zip Code HOLLYWOOD, FL 33020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, BRIDGET <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LINEBARGER GOGGAN BLAIR & SAMPSON LLP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, BRIDGET <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LINEBARGER GOGGAN BLAIR & SAMPSON LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2444/4629 Rpt: 2447/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, DAWN <hr/> 6 Contributor address; City; State; Zip Code PLEASANTON, TX 78064	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CANVASSER		9 Employer (See Instructions) BEXAR DEMOCRATS
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, EDWARD <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UBER DRIVER		Employer (See Instructions) UBER
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, EDWARD <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UBER DRIVER		Employer (See Instructions) UBER
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, EDWARD <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UBER DRIVER		Employer (See Instructions) UBER
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, EDWARD <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UBER DRIVER		Employer (See Instructions) UBER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2445/4629 Rpt: 2448/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, FRANK	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77006		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, GLORIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPRING, TX 77369		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, GLORIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPRING, TX 77369		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, GREGI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75252		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, GREGI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75252		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2446/4629 Rpt: 2449/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, GREGI <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75252	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JOE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JOSE MARIO <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) URBAN PLANNER		Employer (See Instructions) HUITT ZOLLARS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JULIO <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95833	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SYSTEM OPERATOR		Employer (See Instructions) CALWATER
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JULIO <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95833	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SYSTEM OPERATOR		Employer (See Instructions) CALWATER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2447/4629 Rpt: 2450/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, JULIO <hr/> 6 Contributor address; City; State; Zip Code SACRAMENTO, CA 95833	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SYSTEM OPERATOR		9 Employer (See Instructions) CALWATER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, OSVALDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, OVED <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, REYNALDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, RHONDA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROVIDER RELATIONS MGR		Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2448/4629 Rpt: 2451/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, RHONDA <hr/> 6 Contributor address; City; State; Zip Code BAYTOWN, TX 77521	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROVIDER RELATIONS MGR		9 Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, ROBERTO <hr/> Contributor address; City; State; Zip Code SIERRA VISTA, AZ 85635	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, TERRI FLORES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ, TERRI FLORES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPEZ-VIDELA, ANGELA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) FREELANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2449/4629 Rpt: 2452/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOPRESTI, ROBERT	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code RUMSON, NJ 07760		
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENE GUTMAN, MARK H.	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code COMMERCE TWP, MI 48382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENE GUTMAN, MARK H.	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code COMMERCE TWP, MI 48382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENZ, JENNIFER	Amount of Contribution (\$) \$15.25
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENZ, PERRY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2450/4629 Rpt: 2453/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORENZEN, MARK <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) STEEPLECHASE PEDIATRICS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORIN, MICHELE <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LORIN, MICHELE <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOSMAN, JULIE-AUORE <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PHYSICIAN-SCIENTIST		Employer (See Instructions) DANA-FARBER CANCER INSTITUTE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOTT, JAMES <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DRY CLEANING		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2451/4629 Rpt: 2454/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOTT, JAMES <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DRY CLEANING		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOTZ, FRANK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOUDON, KEVIN <hr/> Contributor address; City; State; Zip Code VICTORIA, TX 77901-4743	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MAX MONEY ENT., INC.
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOU, SHARON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, DOUG <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2452/4629 Rpt: 2455/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, FAITH	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75287		
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) BB&T
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, FAITH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75287		
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) PEPSICO
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, FRANCES	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) HEALTHCARE ADMINISTRATOR		Employer (See Instructions) HOUSTON METHODIST HOSPITAL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, GORDY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, GORDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2453/4629 Rpt: 2456/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, GORDY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, GORDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, JOHN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MIDLAND, TX 79705		
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) LWM LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, JULIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RIO MEDINA, TX 78066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, JULIA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code RIO MEDINA, TX 78066		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2454/4629 Rpt: 2457/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2455/4629 Rpt: 2458/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, MICHELE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) GRANT WRITER		Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, MICHELE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) GRANT WRITER		Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, MICHELE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) GRANT WRITER		Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVE, RHONA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76205	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2456/4629 Rpt: 2459/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVETT, KAREN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) MANAGER, NATIONAL ACCOUNTS		9 Employer (See Instructions) MULTIPLAN, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVIN, CYNTHIA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SPIRITUAL COMPANION		Employer (See Instructions) CYNTHIA LOVIN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWENBERG, JULIE AND MICHAEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWENBERG, MICHAEL <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWENBERG, MICHAEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2457/4629 Rpt: 2460/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWENFIELD, RONALD <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79922	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) CASA AUTOMOTIVE GROUP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWENSTEIN, ARTHUR <hr/> Contributor address; City; State; Zip Code GARRISON, NY 10524	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, DIANE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, LAURIE <hr/> Contributor address; City; State; Zip Code BURTON, TX 77835	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) HUMBLE DONKEY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, LAURIE <hr/> Contributor address; City; State; Zip Code BURTON, TX 77835	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) HUMBLE DONKEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2458/4629 Rpt: 2461/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) S&R RESOURCES, INC
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) S&R RESOURCES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) S&R RESOURCES, INC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) S&R RESOURCES
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) S&R RESOURCES, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2459/4629 Rpt: 2462/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) S&R RESOURCES
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) S&R RESOURCES, INC
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, SANDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) S&R RESOURCES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, VIRGINIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW ORLEANS, LA 70119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, VIRGINIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NEW ORLEANS, LA 70119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2460/4629 Rpt: 2463/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWERY, VIRGINIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code NEW ORLEANS, LA 70119		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2461/4629 Rpt: 2464/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWESOLIS, MICHELLE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SINGER		Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SINGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2462/4629 Rpt: 2465/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) SINGER		9 Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) SINGER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2463/4629 Rpt: 2466/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, DANIEL <hr/> 6 Contributor address; City; State; Zip Code PROSPECT, CO 06712	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) MIDDLETOWN HIGH SCHOOL
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, JON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, JON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, SALLY <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, SALLY <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2464/4629 Rpt: 2467/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, SALLY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HENDERSON, NV 89011		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRY, SALLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HENDERSON, NV 89011		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWY, MARTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NA
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWY, MARTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWY, MARTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2465/4629 Rpt: 2468/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWY, MARTIN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWY, RUTH <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOY, GARETH <hr/> Contributor address; City; State; Zip Code CORTE MADERA, CA 94915	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYD, MATT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749-3603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TEMENOS
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYD, MATT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749-3603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TEMENOS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2466/4629 Rpt: 2469/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOYD, MELISSA <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28211	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOZANO, KIMBERLY <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FIRM ADMINISTRATOR		Employer (See Instructions) AMADOR LAW FIRM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOZANO, REBECCA <hr/> Contributor address; City; State; Zip Code GREAT FALLS, MT 59401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LU, SHAN <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) FED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUBAR, DAVID <hr/> Contributor address; City; State; Zip Code AURORA, CO 80016-1908	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AEROSPACE CORP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2467/4629 Rpt: 2470/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUBAR, DAVID	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AURORA, CO 80016-1908		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) AEROSPACE CORP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUBAR, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AURORA, CO 80016-1908		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AEROSPACE CORP
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUBY, THERESA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76013		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUBY, THERESA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76013		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS, MAURI	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2468/4629 Rpt: 2471/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS, MAURI	7 Amount of Contribution (\$) \$106.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS, MICHAEL	Amount of Contribution (\$) \$11.11
Contributor address; City; State; Zip Code BUDA, TX 78610		
Principal occupation / Job title (See Instructions) SOLUTION ENGINEER		Employer (See Instructions) SALESFORCE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS, VALERIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WALPOLE, MA 02081		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WPS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCHESE, ROBERT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EMERYVILLE, CA 94608		
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) LAWRENCE BERKELEY NATIONAL LAB
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCE, BUDDY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2469/4629 Rpt: 2472/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCE, BUDDY <hr/> 6 Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCER, BOB <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCERO, FRED <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87105	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCERO, FRED <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87105	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCHT, ELIZABETH <hr/> Contributor address; City; State; Zip Code MADISON, WI 53714	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) GROUP HEALTH COOPERATIVE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2470/4629 Rpt: 2473/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIANI, CURTIS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CUSTOMER SUPPORT & TRAINING		9 Employer (See Instructions) SQUARE ROOT, INC.
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIANI, CURTIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SUPPORT & TRAINING		Employer (See Instructions) SQUARE ROOT, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIANO, RICHARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703-1715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CATTLE RANCHER		Employer (See Instructions) R2 RANCH, LLC
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIDO, RITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCIO, RICHARD <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2471/4629 Rpt: 2474/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCK, G THOMAS <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCK, G THOMAS <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCKENS, BEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCKHARDT, LOU <hr/> Contributor address; City; State; Zip Code ENNIS, TX 75119	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) UNION OFFICER		Employer (See Instructions) DALLAS AFL-CIO CLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUDWICK, ASHLEY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$2.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2472/4629 Rpt: 2475/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUECKE, CHRIS	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code SOUTH LAKE TAHOE, CA 96150-6101		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUECKE, CHRIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SOUTH LAKE TAHOE, CA 96150-6101		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUECKE, CHRIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SOUTH LAKE TAHOE, CA 96150-6101		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUEDERS, HELEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		Employer (See Instructions) MFAH
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUEDERS, HELEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		Employer (See Instructions) MFAH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2473/4629 Rpt: 2476/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUERA, EDWARD <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUEVANO, KIMBERLY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) UNT
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, JUDY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, JUDY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, JUDY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2474/4629 Rpt: 2477/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, JUDY <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79930-4809	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUHRS, KATHLEEN <hr/> Contributor address; City; State; Zip Code SAUSALITO, CA 94965-2043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUHRS, KATHLEEN <hr/> Contributor address; City; State; Zip Code SAUSALITO, CA 94965-2043	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUIS, CHERYL <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) HOUSTON METHODIST HOSPITAL
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUIS, CHERYL <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) HOUSTON METHODIST HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2475/4629 Rpt: 2478/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKAS, COCO	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code CINCINNATI, OH 45244		
8 Principal occupation / Job title (See Instructions) QUALITY COORDINATOR		9 Employer (See Instructions) HEALTHNET, INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKE, ANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346-1621		
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) JEROLD B. KATZ INTERESTS COMPANY
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKE, ANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346-1621		
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) JEROLD B. KATZ INTERESTS COMPANY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKE, ANA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346-1621		
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) JEROLD B. KATZ INTERESTS COMPANY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKE, ANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUMBLE, TX 77346-1621		
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) JEROLD B. KATZ INTERESTS COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2476/4629 Rpt: 2479/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKEMAN, PHILIP <hr/> 6 Contributor address; City; State; Zip Code JACKSON HEIGHTS, NY 11372	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		9 Employer (See Instructions) ST JOHNS UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKSENBURG, LILLIAN <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIV. OF MARYLAND
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKSENBURG, LILLIAN <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIV. OF MARYLAND
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUKSENBURG, LILLIAN <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIV. OF MARYLAND
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUM, MELISSA <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DUE DILIGENCE ANALYST		Employer (See Instructions) MELISSA M. LUM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2477/4629 Rpt: 2480/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUMPKIN, PAUL <hr/> 6 Contributor address; City; State; Zip Code WHITEFISH, MT 59937	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, CHRISTINA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) THE CHRISTMAN COMPANY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, LUIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SENIOR MANAGER, ACCOUNT OPERATIONS		Employer (See Instructions) Q1MEDIA
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VILMA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) VILMA LUNA LLC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VILMA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) VILMA LUNA LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2478/4629 Rpt: 2481/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 85713	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85713	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85713	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85713	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85713	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2479/4629 Rpt: 2482/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TUCSON, AZ 85713		
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNA, VITA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TUCSON, AZ 85713		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUND, DAVID	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SALISBURY, NC 28146		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUND, VALERIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HILLSBOROUGH, NC 27278		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDEEN, NANCY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CORVALLIS, OR 97330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2480/4629 Rpt: 2483/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDEEN, NANCY	7 Amount of Contribution (\$) \$8.50
6 Contributor address; City; State; Zip Code CORVALLIS, OR 97330		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDQUIST, JUDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDQUIST, JUDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDY, HAZEL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDY, HAZEL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2481/4629 Rpt: 2484/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDY, HAZEL	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDY, JERRY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code IRVING, TX 75063-4422		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNDY, MICHAEL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code FARMINGTON HILLS, MI 48336		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNESTAD, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOT SPRINGS NATIONAL PARK, AR 71913		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNESTAD, SANDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOT SPRINGS NATIONAL PARK, AR 71913		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2482/4629 Rpt: 2485/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNESTAD, SANDRA <hr/> 6 Contributor address; City; State; Zip Code HOT SPRINGS NATIONAL PARK, AR 71913	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNESTAD, SANDRA <hr/> Contributor address; City; State; Zip Code HOT SPRINGS NATIONAL PARK, AR 71913	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNT, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNT, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUO, MINGQIU <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CHIEF GEOPHYSICIST		Employer (See Instructions) SINOPEC TECH HOUSTON LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2483/4629 Rpt: 2486/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUPIA, FRANCESCA <hr/> 6 Contributor address; City; State; Zip Code ANN ARBOR, MI 48104	7 Amount of Contribution (\$) \$47.00
8 Principal occupation / Job title (See Instructions) DOCTORAL STUDENT		9 Employer (See Instructions) EUROPEAN UNIVERSITY INSTITUTE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSK, FRED <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSK, FRED <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSK, FRED <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTERMAN, ALISON <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) WRITING TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2484/4629 Rpt: 2487/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, LAVERN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		9 Employer (See Instructions) PSEMI CORPORATION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, LAVERN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) PSEMI CORPORATION
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, LAVERN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) PSEMI CORPORATION
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, LAVERN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		Employer (See Instructions) PSEMI CORPORATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STUDENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2485/4629 Rpt: 2488/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) STUDENT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STUDENT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STUDENT
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STUDENT
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STUDENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2486/4629 Rpt: 2489/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) STUDENT
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTES, MOLLY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STUDENT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTHER, SUNNY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTTERBACH, RYAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) AT&T
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTTERBACH, RYAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) AT&T

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2487/4629 Rpt: 2490/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUTZ, LARRY <hr/> 6 Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91360	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUZARDO, EDUARDO <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75149	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LEADING AGENT		Employer (See Instructions) CARDINAL GROUP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYDY, THERESA <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, IN 47401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SCHOOL BUS DRIVER		Employer (See Instructions) MCCSC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYERLY, LINDA <hr/> Contributor address; City; State; Zip Code LAHAINA, HI 96761	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYFORD, NICKI <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006-5222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2488/4629 Rpt: 2491/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYFORD, NICKI <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75006-5222	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYLES, DIANNE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYLES, DIANNE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYLES, DIANNE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYMAN, ALICE <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97330	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2489/4629 Rpt: 2492/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYMAN, ALICE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code CORVALLIS, OR 97330		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYMAN, ALICE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CORVALLIS, OR 97330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, KATHLEEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW YORK, NY 10023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2490/4629 Rpt: 2493/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, NANCY <hr/> 6 Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, NANCY <hr/> Contributor address; City; State; Zip Code MOUNT VERNON, VA 98274-6150	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, NANCY <hr/> Contributor address; City; State; Zip Code MT VERNON, WA 98274	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, THEDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, THEDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2491/4629 Rpt: 2494/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, THEDA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76103	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNCH, THEDA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76103	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNN, SUZANNE <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75605	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYNN, SUZANNE <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75605	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYON, JENNIFER <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) FILMMAKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYON, TIMOTHY <hr/> 6 Contributor address; City; State; Zip Code HILLSBORO, OR 97124	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) INTEL, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, FRANCEEN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, KODY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) ME
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, LORNA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97210	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, LORNA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97210	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2493/4629 Rpt: 2496/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, LORNA <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97210	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, MICHAEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LYONS & SIMMONS, LLP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, VERONICA <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85250	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYRIS, SONIA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYSKO, KATHRYN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) FREEMAN

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYTLE, LELIA <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEAM MEMBER		9 Employer (See Instructions) WHOLE FOODS MARKET, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYTLE, LELIA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEAM MEMBER		Employer (See Instructions) WHOLE FOODS MARKET, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYTLE, STEVEN <hr/> Contributor address; City; State; Zip Code URBANDALE, IA 50322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYTLE, STEVEN <hr/> Contributor address; City; State; Zip Code URBANDALE, IA 50322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYTLE, STEVEN <hr/> Contributor address; City; State; Zip Code URBANDALE, IA 50322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2495/4629 Rpt: 2498/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M ALDINGER, RAYMOND	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code REGINA, DC 20000		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M ASH, MARILYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TOPEKA, KS 66614		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M ATKINS, CAROL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75082		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M COSSUTTA, LOUIS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CHILMARK, MA 02535		
Principal occupation / Job title (See Instructions) CARPENTER		Employer (See Instructions) MV CONSTRUCTION CO
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M COSSUTTA, LOUIS	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code CHILMARK, MA 02535		
Principal occupation / Job title (See Instructions) CARPENTER		Employer (See Instructions) MV CONSTRUCTION CO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2496/4629 Rpt: 2499/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M I KKELSEN, FLORIS <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98103	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M LINK, KEVIN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) TECHNICAL PRODUCT MANAGER		Employer (See Instructions) SOLERA NETWORK
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M RAMSEY, CHRISTINA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) EXCEL FINISH
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M RAMSEY, CHRISTINA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) EXCEL FINISH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M WALK, DEBORAH <hr/> Contributor address; City; State; Zip Code APACHE JUNCTION, AZ 85120	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2497/4629 Rpt: 2500/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M WILKERSON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) WILLIAM WILKERSON
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M WILKERSON, WILLIAM <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WILLIAM WILKERSON
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. EFTHYMIOU, LISA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. EFTHYMIOU, LISA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. SMITH, JOYCE <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29615	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2498/4629 Rpt: 2501/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M. SMITH, JOYCE <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, SC 29615	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MA, FANG <hr/> Contributor address; City; State; Zip Code NEW CANAAN, CT 06840	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MA, SHIRLEY <hr/> Contributor address; City; State; Zip Code SAN RAMON, CA 94582	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) MERCK
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MABEN, CHERYL <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MABEN, DAVE <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$145.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2499/4629 Rpt: 2502/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MABRY, BOBBY <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77301	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) BOB MABRY ATTORNEY AT LAW PLLC
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MABRY, BOBBY <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BOB MABRY ATTORNEY AT LAW PLLC
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MABRY, KAREN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAC PERDUE, JIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PERDUE & KIDD
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACAMAY, MARIANA <hr/> Contributor address; City; State; Zip Code YUCAIPA, CA 92399	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) CALIFORNIA CTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2500/4629 Rpt: 2503/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACAPAGAL, MARK <hr/> 6 Contributor address; City; State; Zip Code LITTLETON, CO 80128	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACASKIE, ROSE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACASKIE, ROSE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACASKIE, ROSE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACASKIE, ROSE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2501/4629 Rpt: 2504/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACDONALD, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code OMAHA, NE 68118-3528	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACDOUGAL, VANESSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) RAPID7
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACDOUGAL, VANESSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) RAPID7
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACDOWELL, KELLY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGORMAN, ASHLEY <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92127	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MARKET MANAGER		Employer (See Instructions) ALTRIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2502/4629 Rpt: 2505/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGORMAN, ASHLEY <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92127	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MARKET MANAGER		9 Employer (See Instructions) ALTRIA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGORMAN, ASHLEY <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92127	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MARKET MANAGER		Employer (See Instructions) ALTRIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGORMAN, JOHN <hr/> Contributor address; City; State; Zip Code PROSPER, TX 75078	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGREGOR, GEORGE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGREGOR, LIANNE <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27517	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2503/4629 Rpt: 2506/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHADO, KYLE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75243		
8 Principal occupation / Job title (See Instructions) TECH OVERLORD		9 Employer (See Instructions) SCALE TO WIN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHAJEWSKI, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) JENNIFER
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHEN, ANGELA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FAIRFIELD, CA 94533		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) DOLAN LUMBER CO.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACHT, KATRINA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACINA, MARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2504/4629 Rpt: 2507/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACK, GREGORY	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78750		
8 Principal occupation / Job title (See Instructions) ELECTRICAL ENGINEER		9 Employer (See Instructions) ALEREON, INC.
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACK, JALENE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACK, KERRY	Amount of Contribution (\$) \$50.25
Contributor address; City; State; Zip Code ENGLEWOOD, FL 34223		
Principal occupation / Job title (See Instructions) TRIAL LAWYER		Employer (See Instructions) MACK LAW FIRM
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACK, RHODA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CARLISLE, PA 17013		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKECHNIE, MARK	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code JUSTIN, TX 76247		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2505/4629 Rpt: 2508/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKECHNIE, MARK <hr/> 6 Contributor address; City; State; Zip Code JUSTIN, TX 76247	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKECHNIE, MARK <hr/> Contributor address; City; State; Zip Code JUSTIN, TX 76247	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2506/4629 Rpt: 2509/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> 6 Contributor address; City; State; Zip Code GLENSIDE, PA 19038	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) DR.
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKENZIE, LARAMI <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DR.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2507/4629 Rpt: 2510/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKIE, MICHELE <hr/> 6 Contributor address; City; State; Zip Code OVIEDO, FL 32765	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKOY, BARBARA <hr/> Contributor address; City; State; Zip Code CEDAR HILL, TX 75104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) BOWMAN ENGINEERING AND CONSULTING
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKOY, BARBARA <hr/> Contributor address; City; State; Zip Code CEDAR HILL, TX 75104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) BOWMAN ENGINEERING AND CONSULTING
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACKOY, BARBARA <hr/> Contributor address; City; State; Zip Code CEDAR HILL, TX 75104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) BOWMAN ENGINEERING AND CONSULTING
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACLEAN, ANDREW <hr/> Contributor address; City; State; Zip Code CAMINO, CA 95709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2508/4629 Rpt: 2511/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACLEAN, LESLIE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75201	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) WATERS & KRAUS, LLP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACLEAN, SYLVIA <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACLEAN, SYLVIA <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACLEOD, FIONA <hr/> Contributor address; City; State; Zip Code OPELIKA, AL 36801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FREELANCE THEATRE DIRECTOR		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACLEOD, FIONA <hr/> Contributor address; City; State; Zip Code OPELIKA, AL 36801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2509/4629 Rpt: 2512/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACMILLAN, MONTI <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ROUND ROCK ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACMILLAN, MONTI <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACTAGGART, MELISSA <hr/> Contributor address; City; State; Zip Code CASTLE ROCK, CO 80109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACTAGGART, MELISSA <hr/> Contributor address; City; State; Zip Code CASTLE ROCK, CO 80109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDEN, JUDY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, MS 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2510/4629 Rpt: 2513/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDEN, JUDY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, MS 78216		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDEN, SARA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77091		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDOCK, JANELLE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code KISSIMMEE, FL 34741		
Principal occupation / Job title (See Instructions) SYSTEM ANALYST		Employer (See Instructions) DISNEY CRUISE LINE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDOCK, JANELLE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code KISSIMMEE, FL 34741		
Principal occupation / Job title (See Instructions) SYSTEM ANALYST		Employer (See Instructions) DISNEY CRUISE LINE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDOX, DIXIE	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) GRANTS MANAGER		Employer (See Instructions) GOODWILL INDUSTRIES OF SAN ANTONIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2511/4629 Rpt: 2514/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADDURI, SWARNA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75252	7 Amount of Contribution (\$) \$51.00
8 Principal occupation / Job title (See Instructions) OPERATIONS		9 Employer (See Instructions) NEO PHILANTHROPY -SAAVETX EF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADISON, JANE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADISON, JANE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADISON, SAM <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADISON, SAM <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2512/4629 Rpt: 2515/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADLAND, PIPER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77027	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADRID, IRENE <hr/> Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OWN/OPERATE SWIM SCHOOLS		Employer (See Instructions) SELF EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADRY, LISA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011-4107	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RARE BIRD ADVISORS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADURA, TIFFANY <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MADYUN, ATIBA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20011	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) THE MADYUN GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2513/4629 Rpt: 2516/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAEDGEN, AMANDA <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) COMMUNITYCARE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAEDGEN, AMANDA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) COMMUNITYCARE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAEDGEN, AMANDA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) COMMUNITYCARE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGALLON, GRISELDA <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) BAYLOR SCOTT AND WHITE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGANA, JESSICA <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRAINING & DEVELOPMENT		Employer (See Instructions) CFA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2514/4629 Rpt: 2517/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGARGEE, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGARGEE, JOSEPH <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGAS, JOY <hr/> Contributor address; City; State; Zip Code TEMECULA, CA 92591	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGEE, ANDREW <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90035	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) CDC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGEE, BLAKE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) BLAKE MAGEE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2515/4629 Rpt: 2518/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGEE, LUCINDA <hr/> 6 Contributor address; City; State; Zip Code ARANSAS PASS, TX 78336-2142	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		9 Employer (See Instructions) STRIDE K12
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGGIO, JAY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGNUSON, CHRISTINA <hr/> Contributor address; City; State; Zip Code INDEPENDENCE, MN 55359	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ABBOTT		Employer (See Instructions) BUSINESS PARTNER
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGON, NAINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77041	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HAWES HILL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGOUIRK, DEBBIE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2516/4629 Rpt: 2519/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE, MARIAN <hr/> 6 Contributor address; City; State; Zip Code NOVATO, CA 94947	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE, PHYLLIS <hr/> Contributor address; City; State; Zip Code YARDLEY, PA 19067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) ROMAN PRESS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2517/4629 Rpt: 2520/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DENTON, TX 76210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2518/4629 Rpt: 2521/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DENTON, TX 76210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2519/4629 Rpt: 2522/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DENTON, TX 76210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2520/4629 Rpt: 2523/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DENTON, TX 76210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2521/4629 Rpt: 2524/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGUIRE-POWELL, ALISON <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76210	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAH, NORM <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98109-1679	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RATHER NOT SAY		Employer (See Instructions) RATHER NOT SAY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHAN, ROBERT <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHAYNI, LEMIA <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) UNIVERSITY OF OREGON
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHAYNI, LEMIA <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) UNIVERSITY OF OREGON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2522/4629 Rpt: 2525/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHDAVI, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA, CA 95405	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) CSU
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHDAVI, JENNIFER <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95405	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) CSU
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHER, TIM <hr/> Contributor address; City; State; Zip Code DELAND, FL 32720	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHLER, RONNIE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BALLET INSTRUCTOR		Employer (See Instructions) RONI MAHLER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHLER, RONNIE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BALLET INSTRUCTOR		Employer (See Instructions) RONI MAHLER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2523/4629 Rpt: 2526/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHMOOD, ARIF <hr/> 6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHMUD, PARISA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78732	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHMUD, PARISA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78732	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHONEY, TIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78768	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER & COM. PLANNER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHOUTCHIAN, PAUL <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2524/4629 Rpt: 2527/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAHOUTCHIAN, PAUL <hr/> 6 Contributor address; City; State; Zip Code RALEIGH, NC 27606	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIA, DAVID <hr/> Contributor address; City; State; Zip Code PRINCETON, TX 75407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIENSCHEIN, SUSAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIENSCHEIN, SUSAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN, EDWARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2525/4629 Rpt: 2528/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN, EDWARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN, EDWARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN, EDWARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN, EDWARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN, ELISABETH <hr/> Contributor address; City; State; Zip Code OXNARD, CA 93036	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2526/4629 Rpt: 2529/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAINA, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75243	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAINER, HELENA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054-2143	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) HARRIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIZEL, RICHARD <hr/> Contributor address; City; State; Zip Code RED BANK, NJ 07701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) R.W. MAIZEL F.L.P.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAJID, ANEESA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAJOR, MARILYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2527/4629 Rpt: 2530/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAJORS BACA, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77381	7 Amount of Contribution (\$) \$800.00
8 Principal occupation / Job title (See Instructions) INSURANCE AGENT		9 Employer (See Instructions) MOMENTUM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKIDON, PATRICK <hr/> Contributor address; City; State; Zip Code CLIO, MI 48420	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED & SELF EMPOLED		Employer (See Instructions) UNIQUE DRIVING TESTERS, LLC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKINSON, DENISE <hr/> Contributor address; City; State; Zip Code COEUR DALENE, ID 83815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKINSON, DENISE <hr/> Contributor address; City; State; Zip Code COEUR DALENE, ID 83815	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKINSON, DENISE <hr/> Contributor address; City; State; Zip Code COEUR DALENE, ID 83815	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2528/4629 Rpt: 2531/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKINSON, DENISE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code COEUR DALENE, ID 83815		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAKSHANOFF, ANDREA S	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TOPANGA, CA 90290		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAGISI, KEN	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code WHEAT RIDGE, CO 80214		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2529/4629 Rpt: 2532/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COOPER CITY, FL 33330		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2530/4629 Rpt: 2533/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, CARY <hr/> 6 Contributor address; City; State; Zip Code COOPER CITY, FL 33330	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALAMUD, DONNA <hr/> Contributor address; City; State; Zip Code VENICE, CA 90291	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) MOM		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALANDRUCCOLO, JUDY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALANDRUCCOLO, JUDY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALASPINA, KATHLEEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) MHM PARTNERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2531/4629 Rpt: 2534/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, LINDA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code NY, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2532/4629 Rpt: 2535/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code NEW YORK, NY 10033		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NEW YORK, NJ 10033		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW YORK, NY 10033		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10033		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NY, NY 10033		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2533/4629 Rpt: 2536/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10033	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NJ 10033	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALDONADO, PATRICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIA, ERIN <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		Employer (See Instructions) RUBYS HOME FOR GOOD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2534/4629 Rpt: 2537/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIA, ERIN <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		9 Employer (See Instructions) RUBYS HOME FOR GOOD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIA LOPERGOLO, MONICA <hr/> Contributor address; City; State; Zip Code WALDORF, MD 20603	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIK, NASIR <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIK, NASIR <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIN, JANE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EXPERT CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2535/4629 Rpt: 2538/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIN, JANE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) EXPERT CONSULTANT		9 Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALIN, JANE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EXPERT CONSULTANT		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALINAS, MICHAEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) CENTRIC PHYSICIANS GROUP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALINAS, RUTH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$22.50
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PLUNKETT & GRIESENBECK, INC.
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALINAS, RUTH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PLUNKETT & GRIESENBECK, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2536/4629 Rpt: 2539/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALINAS, RUTH <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) PLUNKETT & GRIESENBECK, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLARI, ELNA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLARI, ELNA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLECK, RICK <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLET-FONTENOT, CORETTA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77047	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HOUSTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2537/4629 Rpt: 2540/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLORY, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code LEVITTOWN, NY 11756	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLORY, DOUGLAS <hr/> Contributor address; City; State; Zip Code LEVITTOWN, NY 11756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALLOY, JACQUELINE <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALMBERG, KRISTIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOBE, JEFF <hr/> Contributor address; City; State; Zip Code BEN LOMOND, CA 95005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2538/4629 Rpt: 2541/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOBE, JEFF <hr/> 6 Contributor address; City; State; Zip Code BEN LOMOND, CA 95005	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOBE, JEFF <hr/> Contributor address; City; State; Zip Code BEN LOMOND, CA 95005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOBE, JEFF <hr/> Contributor address; City; State; Zip Code BEN LOMOND, CA 95005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOBE, JEFF <hr/> Contributor address; City; State; Zip Code BEN LOMOND, CA 95005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, BENITA <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331-5420	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2539/4629 Rpt: 2542/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, BENITA	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77079		
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) RITA LUCIDO
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, BENITA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77079		
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) RITA LUCIDO
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, GEORGIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) HISTORIAN-WRITER-GENEALOGIST		Employer (See Instructions) SELF-EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, JEFFREY	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BEN LOMOND, CA 95005-9217		
Principal occupation / Job title (See Instructions) SPIRITUAL TEACHER		Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, JEFFREY	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BEN LOMOND, CA 95005-9217		
Principal occupation / Job title (See Instructions) SPIRITUAL TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2540/4629 Rpt: 2543/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, KELSEY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75228	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, SARA <hr/> Contributor address; City; State; Zip Code FRIENDSWOOF, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONE, SARA <hr/> Contributor address; City; State; Zip Code FRIENDSWOOF, TX 77546	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALONEY, NANCY <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) GOLDENGATE SOTHEBY'S IR
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOOF, SANDRA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ACCOUNTING MANAGER		Employer (See Instructions) HALE/ASSOCIATES INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2541/4629 Rpt: 2544/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALOY, VALERIE <hr/> 6 Contributor address; City; State; Zip Code HUMBLE, TX 77346	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALVEAUX, MARK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225-1903	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MCCALL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALVEN, TANIA J. <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85719	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALVEN, TANIA J. <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85719	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANAHAN, CAROL J <hr/> Contributor address; City; State; Zip Code RICHMOND, CA 94804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) COMMUNITY CHURCH OF MILL VALLEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2542/4629 Rpt: 2545/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANAHAN, WAYNE L. <hr/> 6 Contributor address; City; State; Zip Code CONCORD, NC 28027	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANASSIAN, TALINE <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANAUGH, MIKE <hr/> Contributor address; City; State; Zip Code VENICE, CA 90291	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388-5204	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388-5204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2543/4629 Rpt: 2546/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2544/4629 Rpt: 2547/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHEE, JANET	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SPRING, TX 77388-5204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCHESTER, KATHLEEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code KENNETT SQUARE, PA 19348		
Principal occupation / Job title (See Instructions) ADMIN PROFESSIONAL		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCINI, LEEANNE	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code VANCOUVER, WA 98684		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANDAL, AYAN	Amount of Contribution (\$) \$512.00
Contributor address; City; State; Zip Code OAKLAND, CA 94611		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2545/4629 Rpt: 2548/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANDEL, LAURA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10023	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANESS, TINA <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) HUGULEY HOSPITAL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANESS, TINA <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) HUGULEY HOSPITAL
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGAN, KAREN <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGAN, KAREN <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2546/4629 Rpt: 2549/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGAN, KAREN <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGAN, KAREN <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGIAMELE, DAVID <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11226	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) CLIENT SERVICES SPECIALIST		Employer (See Instructions) SEATGEEK
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGIAMELE, DAVID <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11226	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) CLIENT SERVICES SPECIALIST		Employer (See Instructions) SEATGEEK
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANGRUM, JO <hr/> Contributor address; City; State; Zip Code ASHLAND CITY, TN 37015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2547/4629 Rpt: 2550/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANIGRASSO, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) GLOBAL REFUGE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANION, ALICE <hr/> Contributor address; City; State; Zip Code BELTON, MO 64012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANION, ALICE <hr/> Contributor address; City; State; Zip Code BELTON, MO 64012	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, BOB <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) SET ENVIRONMENTAL
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, BOB <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) SET ENVIRONMENTAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2548/4629 Rpt: 2551/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, BONNIE	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code QUINCY, MA 02169		
8 Principal occupation / Job title (See Instructions) XXX		9 Employer (See Instructions) XXX
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, GERALD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) MARKET DEVELOPMENT		Employer (See Instructions) SHELL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, LORENE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAGUNA HILLS, CA 92653		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, LORENE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAGUNA HILLS, CA 92653		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, LORENE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAGUNA HILLS, CA 92653		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2549/4629 Rpt: 2552/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, LORENE <hr/> 6 Contributor address; City; State; Zip Code LAGUNA HILLS, CA 92653	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, MARY G. <hr/> Contributor address; City; State; Zip Code MART, TX 76664	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, MARY G. <hr/> Contributor address; City; State; Zip Code MART, TX 76664	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, MARY G. <hr/> Contributor address; City; State; Zip Code MART, TX 76664	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, MARY G. <hr/> Contributor address; City; State; Zip Code MART, TX 76664	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2550/4629 Rpt: 2553/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) CENTURY REGIONAL HEALTH CARE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, SARAH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) ENT SPECIALTY PARTNERS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, SARAH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) ENT SPECIALTY PARTNERS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNERS, MARILYN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, DR. SAM <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2551/4629 Rpt: 2554/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, DR. SAM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, DR. SAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, DR. SAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, DR. SAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, DR. SAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2552/4629 Rpt: 2555/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, ELIZABETH M <hr/> 6 Contributor address; City; State; Zip Code MANOR, TX 78653	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, ERIK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPERATIONS MANAGER		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, PATRICIA <hr/> Contributor address; City; State; Zip Code TUCKAHOE, NY 10707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANNING, WILLIAM R <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70131	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) MANNING ARCHITECTS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANOUSSO, DR. BARBARA SUNDERLAND <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) MANOUSSO MEDIATION AND ARBITRATION LLC:

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2553/4629 Rpt: 2556/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANSFIELD, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANSFIELD, ROGER <hr/> Contributor address; City; State; Zip Code LAWRENCEVILLE, GA 30044	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANSKEY, KIMBERLY <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANSKEY, KIMBERLY <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANTOOTH, ELEANOR <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2554/4629 Rpt: 2557/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANTOOTH, ELEANOR <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANTYLA, SUSAN <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93101	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANTYLA, SUSAN <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93101	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANUEL, CYNTHIA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANUEL, CYNTHIA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2555/4629 Rpt: 2558/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAPLES, DELENN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77096		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAPLES, DELENN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARACEK, BEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BEAVER, PA 15009		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BEAVER AREA HIGH SCHOOL
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARACEK, BEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BEAVER, PA 15009		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BEAVER AREA HIGH SCHOOL
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARACEK, BEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BEAVER, PA 15009		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BEAVER AREA HIGH SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2556/4629 Rpt: 2559/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARBLE, DON <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75035	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCANTEL, JONATHAN <hr/> Contributor address; City; State; Zip Code MEADOWS PLACE, TX 77477	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCANTEL, JONATHAN <hr/> Contributor address; City; State; Zip Code MEADOWS PLACE, TX 77477	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCANTEL, JONATHAN <hr/> Contributor address; City; State; Zip Code MEADOWS PLACE, TX 77477	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCANTEL, JONATHAN <hr/> Contributor address; City; State; Zip Code MEADOWS PLACE, TX 77477	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2557/4629 Rpt: 2560/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCELLESI, ALEX <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	7 Amount of Contribution (\$) \$5.56
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) GIBSON, DUNN & CRUTCHER LLP
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCELLESI, ALEX <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$5.56
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) GIBSON, DUNN & CRUTCHER LLP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCH, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MAINTENANCE MANAGER		Employer (See Instructions) ACC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCH, JONATHAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCK, EUGENE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) VISTA WORLD TRAVEL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2558/4629 Rpt: 2561/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCK, EUGENE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) VISTA WORLD TRAVEL
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2559/4629 Rpt: 2562/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCO, JENNIFER <hr/> Contributor address; City; State; Zip Code MCALESTER, OK 74501-8775	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCOE, JOANNE <hr/> Contributor address; City; State; Zip Code TACOMA, WA 98407	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCUS, DAVID <hr/> Contributor address; City; State; Zip Code SOMERVILLE, MA 02143-4336	Amount of Contribution (\$) \$10.25
Principal occupation / Job title (See Instructions) SENIOR SOFTWARE SUPPORT SPECIALIST		Employer (See Instructions) INTERSYSTEMS CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2560/4629 Rpt: 2563/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARDIS, CORDELL <hr/> 6 Contributor address; City; State; Zip Code BIRMINGHAM, AL 35211	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARENGO, DON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARENGO, DON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARENGO, DON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARENGO, MARY <hr/> Contributor address; City; State; Zip Code WORCESTER, MA 01607	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) NEWTON WELLESLEY HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2561/4629 Rpt: 2564/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARES, FRANCISCO <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RESPIRATORY THERAPIST		9 Employer (See Instructions) ASCENSION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGEL, BERNADETTE <hr/> Contributor address; City; State; Zip Code LANCASTER, PA 17601-5186	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGIN, BERNADETTE <hr/> Contributor address; City; State; Zip Code ISSAQUAH, WA 98027	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGIN, BERNADETTE <hr/> Contributor address; City; State; Zip Code ISSAQUAH, WA 98027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGOLIN, RENEE <hr/> Contributor address; City; State; Zip Code BUTTE VALLEY, CA 95965	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2562/4629 Rpt: 2565/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGOLIS, SCOTT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77069	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PODIATRIST		9 Employer (See Instructions) FOOT & ANKLE CENTERS OF NORTH HOUSTON
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGRAVED, LISA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL DIRECTOR		Employer (See Instructions) UHS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGRAVED, LISA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL DIRECTOR		Employer (See Instructions) UHS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARIETTI, CASSI <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DAYCARE DIRECTOR		Employer (See Instructions) ESSENTIAL STEPS
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARIETTI, CASSI <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DAYCARE DIRECTOR		Employer (See Instructions) ESSENTIAL STEPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2563/4629 Rpt: 2566/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARIN, ROSMERI	7 Amount of Contribution (\$) \$55.55
6 Contributor address; City; State; Zip Code CULVER CITY, CA 90230		
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) DMH
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARINELLI, RUSSELL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code BLANCO, TX 78606		
Principal occupation / Job title (See Instructions) MAILMAN		Employer (See Instructions) DOUBLE M LOGISTICS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARK-WALKER, CHARLES	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code LOS ANGELES, CA 91343		
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) SMH
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARK-WALKER, CHARLES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 91343		
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) SMH
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKEL, FRANK	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PLANO, TX 75093		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2564/4629 Rpt: 2567/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKEL, FRANK <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKLAND, CLIVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROBERTS MARKLAND LLP
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKLEY, JOHN <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NJROTC INSTRUCTOR		Employer (See Instructions) LISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKLUND, ASTRID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKOS, ANTHONY <hr/> Contributor address; City; State; Zip Code MANHATTAN, IL 60442	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2565/4629 Rpt: 2568/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARKOVICH, SUSAN <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 85718	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) FACULTY/RN		9 Employer (See Instructions) U. OF ARIZONA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLOW, LAURIN <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77399	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLOW, LAURIN <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77399	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLOW, LAURIN <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77399	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLOW, WILLIAM <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2566/4629 Rpt: 2569/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLOW, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLOWE, THOMAS <hr/> Contributor address; City; State; Zip Code RAHWAY, NJ 07065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR EMERITUS		Employer (See Instructions) SETON HALL UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARQUAND, JAMES <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		Employer (See Instructions) CHARLES RUTENBERG LLC
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARQUARDT, KAREN <hr/> Contributor address; City; State; Zip Code CIRCLE PINES, MN 55014	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) HENNEPIN COUNTY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARQUEZ, ENRIQUE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2567/4629 Rpt: 2570/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRA, MARY LYNN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code STOCKTON, NJ 08559		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRA, MARY LYNN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code STOCKTON, NJ 08559		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRS, ANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRS, ANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRS, BRIAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022		
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) KOAN HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2568/4629 Rpt: 2571/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRS, BRIAN <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) KOAN HEALTH
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRS, BRIAN <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) KOAN HEALTH
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARRS, BRIAN <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) KOAN HEALTH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSH, JAMES <hr/> Contributor address; City; State; Zip Code WESTFORD, MA 01886	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSH, SHONDA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75704-2045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2569/4629 Rpt: 2572/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSH, SHONDA <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75704-2045	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, GARY <hr/> Contributor address; City; State; Zip Code FRAMINGHAM, MA 01701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) REPARE THERAPEUTICW
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, HERBERT <hr/> Contributor address; City; State; Zip Code WHEATLAND, WY 82201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT MANAGEMENT		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, JANICE <hr/> Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92647	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, JANIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2570/4629 Rpt: 2573/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, JANIE <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, JANIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, JESSIE <hr/> Contributor address; City; State; Zip Code DOWAGIAC, MI 49047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, KARAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, KATY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2571/4629 Rpt: 2574/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, KATY <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) ASCENSION
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, LISA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASST		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, VIRGINIA <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO EMPLOYER
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, VIRGINIA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO EMPLOYER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2572/4629 Rpt: 2575/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NO EMPLOYER
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSHALL, VIRGINIA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NO EMPLOYER
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSTON, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSTON, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSTON, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2573/4629 Rpt: 2576/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MART, GARY <hr/> 6 Contributor address; City; State; Zip Code RIVER FOREST, IL 60305	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PSYCHIATRIST		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MART, GARY <hr/> Contributor address; City; State; Zip Code RIVER FOREST, IL 60305	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTELL-DIANGSON, LAURA <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ADRIENNE <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ANDREW <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87508-8786	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2574/4629 Rpt: 2577/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ANN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code DAVIS, CA 95616		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, BARBARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, BARBARA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, BENJAMIN	Amount of Contribution (\$) \$124.00
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) THRIVENT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CARLA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77055		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2575/4629 Rpt: 2578/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CARROLL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SCOTT, DOUGLASS & MCCONNICO, LLP
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) PEARSON
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, CYNTHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) PEARSON
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, EDWARD <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REAL ESTATE APPRAISER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ELIZABETH <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2576/4629 Rpt: 2579/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ELIZABETH	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ELIZABETH	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ERICA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code PINE HILL, AL 36769		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, FLOYD	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SIMI VALLEY, CA 93065		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GEORGE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MORRISTOWN, NJ 07960		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2577/4629 Rpt: 2580/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2578/4629 Rpt: 2581/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GILBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GAINESVILLE, FL 32605		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, IRMALICIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76123-1616		
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) TWILIO
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, JOHN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, LISA	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code ROUND MOUNTAIN, TX 78663		
Principal occupation / Job title (See Instructions) RETIRED COURT REPORTER		Employer (See Instructions) RETIRED COURT REPORTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2579/4629 Rpt: 2582/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, LISA <hr/> 6 Contributor address; City; State; Zip Code ROUND MOUNTAIN, TX 78663	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) RETIRED COURT REPORTER		9 Employer (See Instructions) RETIRED COURT REPORTER
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MARION <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MARY ARCHER <hr/> Contributor address; City; State; Zip Code GARRSON, NY 10524	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) THERAPIST/CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MARY ARCHER <hr/> Contributor address; City; State; Zip Code GARRSON, NY 10524	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) THERAPIST/CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MARY ARCHER <hr/> Contributor address; City; State; Zip Code GARRSON, NY 10524	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) THERAPIST/CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2580/4629 Rpt: 2583/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MAURICE <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2581/4629 Rpt: 2584/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77009		
8 Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		9 Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, MELISSA	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) ASSISTANT HARRIS COUNTY PUBLIC DEFENDER		Employer (See Instructions) HARRIS COUNTY PUBLIC DEFENDER'S OFFICE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, NICOLE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, RANDI	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77021		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2582/4629 Rpt: 2585/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, RANDI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77021	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) RICE UNIVERSITY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, RANDI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, REBEKAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) CENTENE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, REBEKAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) CENTENE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, REBEKAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) CENTENE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2583/4629 Rpt: 2586/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, REBEKAH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) BUSINESS ANALYST		9 Employer (See Instructions) CENTENE
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, REBEKAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) CENTENE
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, REBEKAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) CENTENE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ROXANNE <hr/> Contributor address; City; State; Zip Code LA CRESCENTA, CA 91214	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BUYER		Employer (See Instructions) LACERA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, STEPHEN <hr/> Contributor address; City; State; Zip Code PINOLE, CA 94564	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2584/4629 Rpt: 2587/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code PINOLE, CA 94564	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, STEPHEN <hr/> Contributor address; City; State; Zip Code PINOLE, CA 94564	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUSAN <hr/> Contributor address; City; State; Zip Code ROGERS, AR 72756	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUZANNE <hr/> Contributor address; City; State; Zip Code CRANBURY, NJ 08512	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SGM & ASSOCIATES INC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUZY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2585/4629 Rpt: 2588/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUZY <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUZY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUZY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, SUZY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, TAILA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) REED SMITH LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2586/4629 Rpt: 2589/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, TAMIKA <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) DEPARTMENT OF STATE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, TAMIKA <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) DEPARTMENT OF STATE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, THOMAS <hr/> Contributor address; City; State; Zip Code CHELMSFORD, MA 01824	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SPORTS SCIENTIST		Employer (See Instructions) ST. DAVID'S HEALTHCARE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, VAL <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, WM DAVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2587/4629 Rpt: 2590/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ZACHERY	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77075		
8 Principal occupation / Job title (See Instructions) CONSTRUCTION MANAGER		9 Employer (See Instructions) KCI TECHNOLOGIES
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ZACHERY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77075		
Principal occupation / Job title (See Instructions) CONSTRUCTION MANAGER		Employer (See Instructions) KCI TECHNOLOGIES
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINDALE, MARY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code PARADISE, TX 76073		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINDALE, MARY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code PARADISE, TX 76073		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEK, BERNARD D	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ENNIS, TX 75119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2588/4629 Rpt: 2591/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINES, LINDA <hr/> 6 Contributor address; City; State; Zip Code CHARLES TOWN, WV 25414	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINES, LINDA <hr/> Contributor address; City; State; Zip Code CHARLES TOWN, WV 25414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINES, LINDA <hr/> Contributor address; City; State; Zip Code CHARLES TOWN, WV 25414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, ANDRE <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) ANDRE MARTINEZ
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, APRIL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79927	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, BESSY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	7 Amount of Contribution (\$) \$10.70
8 Principal occupation / Job title (See Instructions) ENTREPRENEUR		9 Employer (See Instructions) SELF EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, BLAS <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78043	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) INSURANCE BROKER		Employer (See Instructions) SELF EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, CESAR <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) WELL WASH
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, DANILO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SUPPLY TECHNICIAN		Employer (See Instructions) US IBWC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, DANILO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SUPPLY TECHNICIAN		Employer (See Instructions) US IBWC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2590/4629 Rpt: 2593/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTY		9 Employer (See Instructions) BEXAR
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, GORDON <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) DOT COMPLIANCE GROUP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, HUGO <hr/> Contributor address; City; State; Zip Code WESLACO, TX 78599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, ILEANA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) EL PASO KIDNEY SPECIALISTS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, JAMAL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SPECIAL ASSISTANT		Employer (See Instructions) HOLLINS FOR HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, JENNIFER	7 Amount of Contribution (\$) \$18.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78758		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) THE ARC OF TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, JERRY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) DIRECTOR OF HR		Employer (See Instructions) CARROLLTON FARMERS BRANCH ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, JOSE ALFREDO	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) KINDRED HOSPICE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, KATHERINE	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEISD
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, KATHERINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232-4977		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2592/4629 Rpt: 2595/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, KATHRYN C <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JEWELRY DESIGNER		Employer (See Instructions) SEQUIN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, MARIA DELIA <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) KAMAWAY MARKET
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, MARIA DELIA <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, MELISSA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) NCPM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2593/4629 Rpt: 2596/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, MONICA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78736	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) TEXAS EDUCATION AGENCY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, OLGA YVONNE <hr/> Contributor address; City; State; Zip Code INDEPENDENCE, KS 67301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, PRISCILA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) CHAN ZUCKERBERG INITIATIVE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, ROBERT <hr/> Contributor address; City; State; Zip Code LEAKEY, TX 78873	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, RUTH <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2594/4629 Rpt: 2597/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, SANTIAGO <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75227	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SECURITY		9 Employer (See Instructions) ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, SERGIO <hr/> Contributor address; City; State; Zip Code NORWALK, CA 90650	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, SERGIO <hr/> Contributor address; City; State; Zip Code NORWALK, CA 90650	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HACIENDA LA PUENTE USD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, TABATHA <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) NORTH TEXAS SURFACES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, TABATHA <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) NORTH TEXAS SURFACES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2595/4629 Rpt: 2598/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ-ZAMORA, GABRIELLA	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code OSKALOOSA, IA 52577	
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) CARGILL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINV-VALENTA, KATRINA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) ASCENSION-SETON
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIR, MAGDA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77079	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTON, THOMAS	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code BROOKLINE, MA 02446	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LOURIE & CUTLER, PC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTZ, ERIC	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code FARMINGTON, CT 06032	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2596/4629 Rpt: 2599/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTZ, ERIC <hr/> 6 Contributor address; City; State; Zip Code FARMINGTON, CT 06032	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTZ, ERIC <hr/> Contributor address; City; State; Zip Code AMHERST, MA 01002-3117	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARUCA, SAM <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) COVINGTON & BURLING LLP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARUCA, SAM <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) COVINGTON & BURLING LLP
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARWITZ, LINDA <hr/> Contributor address; City; State; Zip Code MANCHACA, TX 78652	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2597/4629 Rpt: 2600/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARX, MARY <hr/> 6 Contributor address; City; State; Zip Code CASTLE ROCK, CO 80108	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARZIANI, MIMI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) TEXAS CIVIL RIGHTS PROJECT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARZOCCO, CRAIG <hr/> Contributor address; City; State; Zip Code PISCATAWAY, NJ 08854	Amount of Contribution (\$) \$3.84
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) ALTICE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARZOLF, KATHRYN <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARZUKI, MARCY <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60647	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) ALEUT FEDERAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2598/4629 Rpt: 2601/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAS, MIRIAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAS, MIRIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCERI, GAYLYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPERATIONS MGR		Employer (See Instructions) ALL TUBE FITTINGS LLC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCERI, GAYLYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) OPERATIONS MGR		Employer (See Instructions) ALL TUBE FITTINGS LLC
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCHAL, ALBERTA <hr/> Contributor address; City; State; Zip Code COLONIAL BEACH, VA 22443	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) MAJESTIC BUILDERS CORP.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2599/4629 Rpt: 2602/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCHAL, ALBERTA <hr/> 6 Contributor address; City; State; Zip Code COLONIAL BEACH, VA 22443	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		9 Employer (See Instructions) MAJESTIC BUILDERS CORP.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCIANGELO, KARA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) FRBNY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCK, MARY BETH <hr/> Contributor address; City; State; Zip Code OCALA, FL 34481-9330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASCK, MARY BETH <hr/> Contributor address; City; State; Zip Code OCALA, FL 34481-9330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASEM, MATHIAS <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94612	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2600/4629 Rpt: 2603/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASERANG, DAVID	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASINO, AMANDA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) HUSTON-TILLOTSON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASKER, CHRISTINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GREENACRES, FL 33463		
Principal occupation / Job title (See Instructions) DESIGN,MAKE,&SELL JEWELRY		Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASKER, CHRISTINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GREENACRES, FL 33463		
Principal occupation / Job title (See Instructions) DESIGN,MAKE,&SELL JEWELRY		Employer (See Instructions) SELF EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, BARBARA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78726		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2601/4629 Rpt: 2604/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, BERTHINE <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77373	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, LINDA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93101	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, MATTHEW <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, REBECCA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, REBECCA <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2602/4629 Rpt: 2605/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, SALLY D.	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code WILLIAMSBURG, VA 23188	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASON, SALLY D.	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code WILLIAMSBURG, VA 23188	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASROOR, MUHAMMAD	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code PROSPECT, KY 40059	
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) LOUISVILLE GERIATRIC ASSOCIATE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSENGALE, WAYNE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code PLANO, TX 75023	
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) BUTLER WEIHMULLER KATZ CRAIG LLP
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSENGALE, WAYNE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code PLANO, TX 75023	
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) BUTLER WEIHMULLER KATZ CRAIG LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2603/4629 Rpt: 2606/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, DIERDRA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77063	7 Amount of Contribution (\$) \$29.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, LODIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, LODIE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77554	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, LOIS <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ALCATEL LUCENT
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, LOIS <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ALCATEL LUCENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2604/4629 Rpt: 2607/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, PAT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) CHASESOURCE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSEY, PAT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CHASESOURCE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSINGILL, JANICE <hr/> Contributor address; City; State; Zip Code LYTLE, TX 78052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSINGILL, JANICE <hr/> Contributor address; City; State; Zip Code LYTLE, TX 78052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTENBROOK, SHIRLEY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2605/4629 Rpt: 2608/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTENBROOK, SHIRLEY <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERSON, AMANDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERSON, NANCY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-8439	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERSON, NANCY <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-8439	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTRANGELO, DOLORES <hr/> Contributor address; City; State; Zip Code NORTH FORT MYERS, FL 33903	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2606/4629 Rpt: 2609/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTROMATTEO, CHARLENE <hr/> 6 Contributor address; City; State; Zip Code BREWSTER, MA 02631	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATA, ERIC <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) THE DALLAS MORNING NEWS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATA, ERIC <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) THE DALLAS MORNING NEWS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATA, ERIC <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) THE DALLAS MORNING NEWS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATARESE, BETTY <hr/> Contributor address; City; State; Zip Code WESTAMPTON, NJ 08060	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2607/4629 Rpt: 2610/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATCHAM, RYAN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76137	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PRODUCT MANAGER		9 Employer (See Instructions) T-MOBILE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATERA, MARGUERITE <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATERA, MARGUERITE <hr/> Contributor address; City; State; Zip Code GLOUCESTER, MA 01930	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHENY, BRENDA <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHENY, BRENDA <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2608/4629 Rpt: 2611/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHEW, JULI <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) FORT BEND COUNTY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHEWS, DANA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHEWS, DAPHNE <hr/> Contributor address; City; State; Zip Code BEAR, DE 19701-3514	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, ALLISON <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20854	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) ARL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, KATE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2609/4629 Rpt: 2612/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, KATE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code KYLE, TX 78640		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, MARILYN	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, MARYAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, S WAYNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROSHARON, TX 77583		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, S WAYNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROSHARON, TX 77583		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2610/4629 Rpt: 2613/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHISEN, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94546	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) COMPLIANCE MGR		9 Employer (See Instructions) E-RECYCLING OF CA
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHISEN, KATHRYN <hr/> Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMPLIANCE MGR		Employer (See Instructions) E-RECYCLING OF CA
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHISEN, KATHRYN <hr/> Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94546	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMPLIANCE MGR		Employer (See Instructions) E-RECYCLING OF CA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHON, JUDY <hr/> Contributor address; City; State; Zip Code ROSWELL, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHON, JUDY <hr/> Contributor address; City; State; Zip Code ROSWELL, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2611/4629 Rpt: 2614/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHSON, DIANE <hr/> 6 Contributor address; City; State; Zip Code EDMONDS, WA 98026	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		9 Employer (See Instructions) STUDIO 26 PILATES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHSON, DIANE <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98026	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) STUDIO 26 PILATES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHSON, DIANE <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98026	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) STUDIO 26 PILATES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHSON, DIANE <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98026	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) STUDIO 26 PILATES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHSON, DIANE <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98026	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) STUDIO 26 PILATES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2612/4629 Rpt: 2615/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATIELLA, DAVID <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78255	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UTSA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATIER, MARC <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATIER, MARC <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATIER, MARC <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATIER, MARC <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2613/4629 Rpt: 2616/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATLOCK, ANN <hr/> 6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATLOCK, ANN <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATLOCK, BENJAMIN L. <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244-5909	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NON COMMISSION SECURITY OFFICER		Employer (See Instructions) GOOD GUARD SECURITY SERVICES, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATOCHA, MEENA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) MEENA MATOCHA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATSUMOTO, SHANNON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75258	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2614/4629 Rpt: 2617/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATSUMOTO, SHANNON <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75258	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTERN, LINDA L <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) AGRICULTURE		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTESON, MARK <hr/> Contributor address; City; State; Zip Code ASHLAND, MA 01721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TELECOM COORDINATOR		Employer (See Instructions) HARVARD UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTESON, MARK <hr/> Contributor address; City; State; Zip Code ASHLAND, MA 01721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TELECOM COORDINATOR		Employer (See Instructions) HARVARD UNIVERSITY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CRAIG <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) LICENSED MASSAGE THERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2615/4629 Rpt: 2618/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CRAIG <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) LICENSED MESSAGE THERAPIST		9 Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CRAIG <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) LICENSED MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, CRAIG <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LICENSED MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, H RANDALL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, JACK <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75057	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) MATTHEW SW/MATTHEW HOLDINGS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2616/4629 Rpt: 2619/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, JACK <hr/> 6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75057	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) DEVELOPER		9 Employer (See Instructions) MATTHEW SW/MATTHEW HOLDINGS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, JEREMY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, JEREMY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, JOHN <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226-9569	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) MATTHEWS HOLDINGS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, JOHN <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226-9569	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) MATTHEWS HOLDINGS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2617/4629 Rpt: 2620/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, LORI <hr/> 6 Contributor address; City; State; Zip Code SIENNA, TX 77459	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, LORI <hr/> Contributor address; City; State; Zip Code SIENNA, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, LORI <hr/> Contributor address; City; State; Zip Code SIENNA, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, SHERRY <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SHERRY MATTHEWS GROUP
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, SPENCER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2618/4629 Rpt: 2621/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHEWS, SPENCER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTHIESEN, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTSSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MEMBER BENEFITS		Employer (See Instructions) CSEA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATTSSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BENEFITS COORDINATOR		Employer (See Instructions) CSEA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATUJEC, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2619/4629 Rpt: 2622/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATUJEC, JAMES <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77092	7 Amount of Contribution (\$) \$26.26
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAULDIN, CHRISTIAN <hr/> Contributor address; City; State; Zip Code JONESTOWN, TX 78645	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) VIBAK ENTERPRISES LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAULSBY, SAUNDRA <hr/> Contributor address; City; State; Zip Code FOREST HILL, MD 21050	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAURACHER, ROBERT <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96815	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) EXEC		Employer (See Instructions) BRIDGER AEROSPACE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXHAM, BARBARA <hr/> Contributor address; City; State; Zip Code GORDONVILLE, TX 76245	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2620/4629 Rpt: 2623/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXSON, THOMAS AND DEBORAH <hr/> 6 Contributor address; City; State; Zip Code PITTSBURGH, PA 15229	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) COHEN & GRIGSBY, P.C.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXWELL, CLAYTON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXWELL, ELIZABETH G <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLERGY		Employer (See Instructions) EPISCOPAL CHURCH
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXWELL, ELIZABETH G <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLERGY		Employer (See Instructions) EPISCOPAL CHURCH
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAXWELL, STEPHEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BAILEY & GALYEN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2621/4629 Rpt: 2624/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, ELISE <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PTA		9 Employer (See Instructions) RTS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, ELISE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PTA		Employer (See Instructions) RTS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, GEORGE <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80918	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, LEAH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248-4050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, LEAH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248-4050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2622/4629 Rpt: 2625/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, NORMAN <hr/> 6 Contributor address; City; State; Zip Code PITTSBURGH, PA 15212	7 Amount of Contribution (\$) \$50.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, NORMAN <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, NORMAN <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, PAULA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYE, DAVID <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2623/4629 Rpt: 2626/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYER-LIVINGSTON, SUSAN <hr/> 6 Contributor address; City; State; Zip Code SHAKER HTS, OH 44122	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, ARCH <hr/> Contributor address; City; State; Zip Code PLAINVIEW, TX 79062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WAYLAND
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, ARCH <hr/> Contributor address; City; State; Zip Code PLAINVIEW, TX 79062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WAYLAND
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, DIANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) CHRYSLER CAPITAL
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, EDY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2624/4629 Rpt: 2627/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, EDY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76132	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, EDY LOU <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, EDY LOU <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, FRAN <hr/> Contributor address; City; State; Zip Code FARMINGTON, NM 87401-8629	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, FRAN <hr/> Contributor address; City; State; Zip Code FARMINGTON, NM 87401-8629	Amount of Contribution (\$) \$2.78
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2625/4629 Rpt: 2628/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, MARK <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76501	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYFIELD, MARK <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76501	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYMI, JOSUE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYMI, JOSUE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYNARD, STEPHEN <hr/> Contributor address; City; State; Zip Code TRUSSVILLE, AL 35173	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2626/4629 Rpt: 2629/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYNARD, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code TRUSSVILLE, AL 35173	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, BARBARA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, BARBARA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, BRANDY <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FINACE		Employer (See Instructions) ISD
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, DONNA <hr/> Contributor address; City; State; Zip Code BELMONT, MA 02478	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		Employer (See Instructions) PA CONSULTING GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2627/4629 Rpt: 2630/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, DONNA <hr/> 6 Contributor address; City; State; Zip Code BELMONT, MA 02478	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		9 Employer (See Instructions) PA CONSULTING GROUP
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, SHAY <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL PSYCHOLOGIST		Employer (See Instructions) DALLAS ISD
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO, SHAY <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL PSYCHOLOGIST		Employer (See Instructions) DALLAS ISD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYO-GRAY, AYSIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYS, JAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) OIL & GAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2628/4629 Rpt: 2631/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZELLA, DAVID <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77025	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2629/4629 Rpt: 2632/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZERO, JOHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAZHAR, CRISTY <hr/> Contributor address; City; State; Zip Code FORNEY, TX 75126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) MAZHAR MEDIATION & ARBITRATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2630/4629 Rpt: 2633/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MBOUP, KHADY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77082	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MC GUIRE, LISA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NETWORKING MANAGER		Employer (See Instructions) ESCALANTE ENGINEERING
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCADOO, THOMAS <hr/> Contributor address; City; State; Zip Code CELEBRATION, FL 34747	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) CHEF		Employer (See Instructions) UNIVERSAL STUDIOS ORLANDO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAFEE, DEBRA <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40218	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAFEE, VANESSA <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) FIDENCIO LEIJA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2631/4629 Rpt: 2634/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAFEE, VANESSA <hr/> 6 Contributor address; City; State; Zip Code TEXAS CITY, TX 77599	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) INSURANCE AGENT		9 Employer (See Instructions) NAVSAV
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCALLEN, LINCOLN <hr/> Contributor address; City; State; Zip Code WAYNE, PA 19807-3617	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCALLEN, LINCOLN <hr/> Contributor address; City; State; Zip Code WAYNE, PA 19807-3617	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCANDREW, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCANELLY, ELAINE <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2632/4629 Rpt: 2635/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCANELLY, ELAINE <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77433	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARTHUR, JACQUELINE <hr/> Contributor address; City; State; Zip Code MERCER ISLAND, WA 98040	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONCIERGE		Employer (See Instructions) AMERICAN PACIFIC MORTGAGE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCARTHUR, JACQUELINE <hr/> Contributor address; City; State; Zip Code MERCER ISLAND, WA 98040	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) CONCIERGE		Employer (See Instructions) AMERICAN PACIFIC MORTGAGE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAULIFFE, CATHLEEN <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAULIFFE, CATHLEEN <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2633/4629 Rpt: 2636/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAULIFFE, CATHLEEN <hr/> 6 Contributor address; City; State; Zip Code ROCKPORT, TX 78382	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBEE, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBETH, LILLIAN S <hr/> Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) CUSTOM INK
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, CATHY <hr/> Contributor address; City; State; Zip Code FORT MYERS, FL 33966	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, CATHY <hr/> Contributor address; City; State; Zip Code OLD FORGE, PA 18518	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2634/4629 Rpt: 2637/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, WILLIAM <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBURNIE, MICHAEL <hr/> Contributor address; City; State; Zip Code BAINBRIDGE ISLAND, WA 98110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MCBURNIE PARTNERS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCABE, ANNE AND WILLIAM <hr/> Contributor address; City; State; Zip Code DELMAR, NY 12054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCABE, DANIEL <hr/> Contributor address; City; State; Zip Code EDINA, MN 55436	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF MINNESOTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2635/4629 Rpt: 2638/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCALL, JOAN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code NOVATO, CA 94949-6629		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCALLA, SARAH	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code AUSTIN TX, TX 78703		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) DELL
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAMMON, LENA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78750		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAMMON, LENA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78750		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAMY, MARIATA	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code SAN LEON, TX 77539		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2636/4629 Rpt: 2639/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAMY, MARIATA	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code SAN LEON, TX 77539		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, JANEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WEST COLUMBIA, TX 77486-9654		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, JANEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WEST COLUMBIA, TX 77486-9654		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, LINDA J & PAUL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WADSWORTH, OH 44281-6209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALEDO, TX 76008		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN AERONAUTICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2637/4629 Rpt: 2640/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code ANNETTA, TX 76008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FIELD SALES SUPPORT ENGINEER		9 Employer (See Instructions) LOCKHEED MARTIN AERONAUTICS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, ROBERT <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN AERONAUTICS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, ROBERT <hr/> Contributor address; City; State; Zip Code ANNETTA, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FIELD SALES SUPPORT ENGINEER		Employer (See Instructions) LOCKHEED MARTIN AERONAUTICS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, ROBERT <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN AERONAUTICS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, SEAN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ZYNGA, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2638/4629 Rpt: 2641/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, SEAN <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	7 Amount of Contribution (\$) \$3.13
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) ZYNGA, INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, WESLEY <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GOODWILL
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, WESLEY <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) GOODWILL
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANN, WILLIAM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANTS, BLONDELL <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2639/4629 Rpt: 2642/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANTS, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANTS, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANTS, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCANTS, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARLEY, DEBORAH <hr/> Contributor address; City; State; Zip Code FATE, TX 75087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2640/4629 Rpt: 2643/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARRON, DAN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) THE STARR CONSPIRACY
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCART, DEBORAH <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, CLIFFORD <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) HEWLETT PACKARD ENTERPRISE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, DANIEL <hr/> Contributor address; City; State; Zip Code NORTH BEND, OR 97459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, ELKE <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2641/4629 Rpt: 2644/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, JAMES <hr/> 6 Contributor address; City; State; Zip Code DALLAS TEXAS, TX 75204	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) DIAMOND MCCARTHY LLP
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, JOHN <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, MAGGIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GRANT WRITER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, MARY <hr/> Contributor address; City; State; Zip Code BRATTLEBORO, VT 05301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) WELLNESS WORKS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, SALLY <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2642/4629 Rpt: 2645/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, TIMOTHY <hr/> 6 Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33404	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, TIMOTHY <hr/> Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33404	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, TIMOTHY <hr/> Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33404	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, TIMOTHY <hr/> Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTHY, VALERIE <hr/> Contributor address; City; State; Zip Code HAMPTON BAYS, NY 11946	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2643/4629 Rpt: 2646/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTNEY, RANDA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TRANSPORTATION CONSULTANT		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, GREG <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRC ANALYST		Employer (See Instructions) TX DEPARTMENT OF INFORMATION RESOURCES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, KEITH <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) AMERICAN AIRLINES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, MARI <hr/> Contributor address; City; State; Zip Code MADISON, WI 53726	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, PEGGY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) GARLAND ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2644/4629 Rpt: 2647/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, PEGGY <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75041	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		9 Employer (See Instructions) GARLAND ISD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASSESSMENT SPECIALIST		Employer (See Instructions) HOUGHTON MIFFLIN HARCOURT
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, TAYLOR <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) MCLANE FORD OF FREDERICKSBURG
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCARTY, TAYLOR <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) MCLANE FORD OF FREDERICKSBURG
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCASLAND, JEAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2645/4629 Rpt: 2648/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAULEY, JIMMY <hr/> 6 Contributor address; City; State; Zip Code TEXARKANA, AR 71854	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LOGISTICS		9 Employer (See Instructions) CRAWFORD ELECTRIC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLAIN, KC <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLANAHAN, LISA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLELLAN, ANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLELLAN, SANDRA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2646/4629 Rpt: 2649/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLELLAN, SANDRA <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76012	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLELLAN, SANDRA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLENNAHAN, KELLY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RETIRED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLENNAHAN, KELLY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RETIRED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLINTOCK, DEB <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2647/4629 Rpt: 2650/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLINTOCK, DEB	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLINTOCK, MARILYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WACOWACO, TX 76708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLINTON, MARLENE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) COMMUNICATIONS CONSULTANT		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLOSKEY, HELEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code RUMSEY, CA 95679		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLOSKEY, HELEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code RUMSEY, CA 95679		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2648/4629 Rpt: 2651/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLOUD, CARL <hr/> 6 Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28304-2637	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLUNG, MARILYN GAIL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLUNG, MARILYN GAIL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLUNG, MARILYN GAIL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLUNG, MARILYN GAIL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2649/4629 Rpt: 2652/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURE, D <hr/> 6 Contributor address; City; State; Zip Code BATTLE GROUND, WA 98604	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURE, EDWARD <hr/> Contributor address; City; State; Zip Code PRINCETON, NJ 08542	Amount of Contribution (\$) \$10.25
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SABA SOFTWARE, INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURE, JOHN P <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURE, JOHN P <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURKIN, COURTNEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PODIATRIST		Employer (See Instructions) LAKEWOOD FOOT AND ANKLE SPECIALISTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2650/4629 Rpt: 2653/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOLLOUGH, RHONDA <hr/> 6 Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746-3506	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SERENITY IN THE SEA LLC		9 Employer (See Instructions) RHONDA MCCOLLOUGH
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOLLOUGH, RHONDA <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746-3506	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SERENITY IN THE SEA LLC		Employer (See Instructions) RHONDA MCCOLLOUGH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOLLOUGH, RHONDA <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746-3506	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SERENITY IN THE SEA LLC		Employer (See Instructions) RHONDA MCCOLLOUGH
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOLLUM, MALCOLM <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92126	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOMMON, MARJORIE L <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60623	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2651/4629 Rpt: 2654/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCONLOGUE, JOE <hr/> 6 Contributor address; City; State; Zip Code HARRISBURG, PA 17223	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCONNELL, DENNIS <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCONNELL, DENNIS <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCONNELL, LORI <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) MCCONNELL ORTHOPEDIC CLINIC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORD, SOPHRONIA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNDERWRITING OFFICER		Employer (See Instructions) TRAVELERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2652/4629 Rpt: 2655/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORD, SOPHRONIA <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) UNDERWRITING OFFICER		9 Employer (See Instructions) TRAVELERS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORKLE-BECKERMAN, MARIAN <hr/> Contributor address; City; State; Zip Code STONE RIDGE, NY 12484	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) AQUENT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMACK, MAUREEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMACK, MAUREEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, DEVON <hr/> Contributor address; City; State; Zip Code GUILFORD, CT 06437	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) UNIVERSITY OF NEW HAVEN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2653/4629 Rpt: 2656/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, DONNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, DONNA BETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JAMES <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) USAA
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JAMES <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) USAA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JUDY <hr/> Contributor address; City; State; Zip Code MANCHESTER TOWNSHIP, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2654/4629 Rpt: 2657/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JUDY <hr/> 6 Contributor address; City; State; Zip Code MANCHESTER TOWNSHIP, NJ 08759	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JUDY <hr/> Contributor address; City; State; Zip Code MANCHESTER TOWNSHIP, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JUDY <hr/> Contributor address; City; State; Zip Code MANCHESTER TOWNSHIP, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, JUDY <hr/> Contributor address; City; State; Zip Code MANCHESTER TOWNSHIP, NJ 08759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, RAY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2655/4629 Rpt: 2658/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, SARA <hr/> 6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84105	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) UNIVERSITY OF UTAH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, SONIA <hr/> Contributor address; City; State; Zip Code LA HABRA, CA 90633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, SONIA <hr/> Contributor address; City; State; Zip Code LA HABRA, CA 90633	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, SONIA <hr/> Contributor address; City; State; Zip Code LA HABRA, CA 90633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOSKEY, LAURA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) UFCW LOCAL 540

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2656/4629 Rpt: 2659/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOURT, CHARLES <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) TRAINING SPECIALIST		9 Employer (See Instructions) FUTABA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOURT, PAUL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOWEN, SHERRONE <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, DEXTER <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) FORT BEND COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JANETTA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2657/4629 Rpt: 2660/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JANETTA <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JANETTA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JUDY <hr/> Contributor address; City; State; Zip Code LADERA RANCH, CA 92694	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JUDY <hr/> Contributor address; City; State; Zip Code LADERA RANCH, CA 92694	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, KAREN <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	Amount of Contribution (\$) \$3.84
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2658/4629 Rpt: 2661/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCRACKEN, DEBRA <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCREDIE, PATRICIA <hr/> Contributor address; City; State; Zip Code KENWOOD, CA 95452	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCREDIE, PATRICIA <hr/> Contributor address; City; State; Zip Code KENWOOD, CA 95452	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCROSKY, JOHN C <hr/> Contributor address; City; State; Zip Code LASALLE, IL 61301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCROSKY, JOHN C <hr/> Contributor address; City; State; Zip Code LASALLE, IL 61301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2659/4629 Rpt: 2662/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUE, JEBRON	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78730		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUE, ROB	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code COLUMBIA, SC 29201-1715		
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUISTION, REBECCA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) NORTHWESTERN MUTUAL
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUISTION, REBECCA	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) DIRECTOR OF OPERATIONS		Employer (See Instructions) COLLINS FINANCIAL
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUISTION, REBECCA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081		
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) NORTHWESTERN MUTUAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2660/4629 Rpt: 2663/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, MARK	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78722		
8 Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		9 Employer (See Instructions) MARK MCCULLOCH
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, MARK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78722		
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) MARK MCCULLOCH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, SUZANNE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTLAND, OR 97239		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, SUZANNE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTLAND, OR 97239		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, SUZANNE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTLAND, OR 97239		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2661/4629 Rpt: 2664/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOCH, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97239	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOUGH, ANITA <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOUGH, ANITA <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOUGH, NORA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOUGH, NORA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2662/4629 Rpt: 2665/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLOUGH, PHYLLIS	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code BLOOMINGTON, IN 47401		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCURTIS, DEBORAH	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LEANDER, TX 78641		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUTCHEON, ROSIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77093		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCUTCHEON, ROSIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77093		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ANGIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2663/4629 Rpt: 2666/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, ANGIE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ROUND ROCK ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, STEVEN <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37924	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) KNOX COUNTY SCHOOLS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, TIM <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79905	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) SOUTH CENTRAL REGIONAL TRANSIT DISTRICT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, TIM <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79905	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SPECIAL PROJECTS PLANNER		Employer (See Instructions) SOUTH CENTRAL REGIONAL TRANSIT DISTRICT
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, TIM <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79905	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SPECIAL PROJECTS PLANNER		Employer (See Instructions) SOUTH CENTRAL REGIONAL TRANSIT DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2664/4629 Rpt: 2667/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, VIRGINIA STOGNER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77092	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		9 Employer (See Instructions) UNITED AIRLINES
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, VIRGINIA STOGNER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) UNITED AIRLINES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDERMOTT, LEONE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60645	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, ALEX <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, ANDREW <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2665/4629 Rpt: 2668/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, BYRON AND CHERYL <hr/> 6 Contributor address; City; State; Zip Code RHINELANDER, WI 54501	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, BYRON AND CHERYL <hr/> Contributor address; City; State; Zip Code RHINELANDER, WI 54501	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, JIM <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) JAMES MCDONALD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, JOHN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76011	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, JOHN <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76011	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2666/4629 Rpt: 2669/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, KELLY <hr/> 6 Contributor address; City; State; Zip Code LORENA, TX 76655	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, KELLY <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, KELLY <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, KELLY <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, RAFFERTY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ARCHITECT		Employer (See Instructions) INSPIRE11

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2667/4629 Rpt: 2670/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, RAFFERTY <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ARCHITECT		9 Employer (See Instructions) INSPIRE11
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, STEPHEN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30309	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATE OF TEXAS		Employer (See Instructions) STATE OF TEXAS
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, STEPHEN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30309	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATE OF TEXAS		Employer (See Instructions) STATE OF TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2668/4629 Rpt: 2671/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	7 Amount of Contribution (\$) \$124.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2669/4629 Rpt: 2672/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDONALD, SUSAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75007		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2670/4629 Rpt: 2673/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JAN <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JAN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JAN <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2671/4629 Rpt: 2674/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LEANDER, TX 78641		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEANDER, TX 78641		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, JOHNNIE	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code LEANDER, TX 78641		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDOWELL, PATRICIA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SALINAS, CA 93907		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCELHATTAN, WENDY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) ENTERPRISE ARCHITECT		Employer (See Instructions) ATOS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2672/4629 Rpt: 2675/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCELROY, JIM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		9 Employer (See Instructions) HEALTH AND HUMAN SVCS DEPT
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCELROY, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) HEALTH AND HUMAN SVCS DEPT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCELROY, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) HEALTH AND HUMAN SVCS DEPT
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCELROY, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) HEALTH AND HUMAN SVCS DEPT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFADDEN, ELIZABETH <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, TX 76426	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2673/4629 Rpt: 2676/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFADDEN, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code BRIDGEPORT, TX 76426	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED TEACHER		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFADDEN, ELIZABETH <hr/> Contributor address; City; State; Zip Code BRIDGEPORT, TX 76426	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFADDEN-HIGHTOWER, DELBRA <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFADDEN-HIGHTOWER, DELBRA <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFARLAND, ADONIA J <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2674/4629 Rpt: 2677/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFARLAND, ADONIA J <hr/> 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFARLAND, ELLEN <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RANCH MANAGER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFARLANE, RONALD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) SELF
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFARLANE, RONALD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCFEETERS, MONICA <hr/> Contributor address; City; State; Zip Code BALDWYN, MS 38824	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2675/4629 Rpt: 2678/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARITY, CATHLEEN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARITY, CATHLEEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARITY, CATHLEEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2676/4629 Rpt: 2679/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2677/4629 Rpt: 2680/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2678/4629 Rpt: 2681/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75248		
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2679/4629 Rpt: 2682/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2680/4629 Rpt: 2683/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARRAHAN, ANDY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGARVEY, KRISTEN <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TECHNOLOGY LEADER		Employer (See Instructions) DOW CHEMICAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGAUGHEY, SANDRA <hr/> Contributor address; City; State; Zip Code FERGUS FALLS, MN 56537	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGAUGHEY, SANDRA <hr/> Contributor address; City; State; Zip Code FERGUS FALLS, MN 56537	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEACHEN, BARBARA <hr/> Contributor address; City; State; Zip Code RENSSELAERVILLE, NY 12147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2681/4629 Rpt: 2684/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, BRANDON CHASE <hr/> 6 Contributor address; City; State; Zip Code AUBREY, TX 76227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TRUCK DRIVER		9 Employer (See Instructions) GROENDYKE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, BRANDON CHASE <hr/> Contributor address; City; State; Zip Code AUBREY, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) GROENDYKE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, CANDRA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) MISD
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, LOIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, LOIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2682/4629 Rpt: 2685/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, SARAH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FIELD DIRECTOR		9 Employer (See Instructions) KIRK WATSON
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FIELD DIRECTOR		Employer (See Instructions) KIRK WATSON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEHEE, DAVID <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429-6967	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGILL, LAURIE <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGILL, LAURIE <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2683/4629 Rpt: 2686/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGINNIS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGLAMERY, GAYLA <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21218-1708	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGLISH PROFESSOR		Employer (See Instructions) LOYOLA U MD
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOLDRICK, IRENE <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) AURORA HEALTH CARE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOVERN, KATHERINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOWAN, CHESTER <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2684/4629 Rpt: 2687/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOWAN, GREGORY <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) TED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRANE-VOGEL, MARSELA <hr/> Contributor address; City; State; Zip Code MURRIETA, CA 92562	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRATH, MARY <hr/> Contributor address; City; State; Zip Code VENTURA, CA 93001	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, PAMELA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, PAMELA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75021	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2685/4629 Rpt: 2688/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, PAMELA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code DENISON, TX 75021		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, PAMELA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DENISON, TX 75021		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, PAMELA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DENISON, TX 75021		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGREW, BRAD	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGREW, BRADLEY	Amount of Contribution (\$) \$92.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2686/4629 Rpt: 2689/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRUDER, RACHEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78752	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MANAGER, EVENTS AND OPERATIONS		9 Employer (See Instructions) UNIVERSITY OF TEXAS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRUDER, RACHEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER, EVENTS AND OPERATIONS		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRUDER, RL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASST EVENTS MANAGER		Employer (See Instructions) UT AUSTIN
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRUDER, RL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASST EVENTS MANAGER		Employer (See Instructions) UT AUSTIN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRUDER, RL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EVENT MANAGER		Employer (See Instructions) UT-AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2687/4629 Rpt: 2690/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUINNESS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) HARRIS CO OMB
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUIRE, ALLISON <hr/> Contributor address; City; State; Zip Code OZONA, TX 76943	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUIRE, BRANDON <hr/> Contributor address; City; State; Zip Code MURRIETA, CA 92562	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) NA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUIRE, BRENDAN <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95820	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TABORDA SOLUTIONS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUIRE, JEANNIE M <hr/> Contributor address; City; State; Zip Code MONTVILLE, NJ 07045	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) MARKETING CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2688/4629 Rpt: 2691/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUIRE, K LISA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77064		
8 Principal occupation / Job title (See Instructions) NETWORKING MANAGER		9 Employer (See Instructions) ESCALANTE ENGINEERING
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGUIRE, K LISA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77064		
Principal occupation / Job title (See Instructions) NETWORKING MANAGER		Employer (See Instructions) ESCALANTE ENGINEERING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCHENNEY, MONICA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PALO ALTO, CA 94306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCHENRY, CARROLL D	Amount of Contribution (\$) \$16.50
Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070-5921		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCHENRY, CARROLL D	Amount of Contribution (\$) \$16.50
Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070-5921		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2689/4629 Rpt: 2692/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILHERAN, SARAH	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTN, TX 83814		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILHERAN, SARAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) SELECT PHYSICAL THERAPY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILHERAN, SARAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) SELECT PHYSICAL THERAPY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILVAIN, C.PATRICK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILVAIN, C.PATRICK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2690/4629 Rpt: 2693/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINISH, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code DOTHAN, AL 36301	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SUBCONTRACT ADMINISTRATOR		9 Employer (See Instructions) HOLLIS & SPANN, INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINNIS, GAVIN <hr/> Contributor address; City; State; Zip Code HOLLYWOOD PARK, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WYATT LAW FIRM PLLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTOSH, JEAN C <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220-1902	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTOSH, SARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTOSH, SARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2691/4629 Rpt: 2694/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTOSH, SARA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77006		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTURFF, BETTY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CLEVELAND, TX 77328		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTURFF, BETTY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CLEVELAND, TX 77328		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTYRE, DIANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CLEVELAND, OH 44120		
Principal occupation / Job title (See Instructions) CHOREOGRAPHER		Employer (See Instructions) DIANNE MCINTYRE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTYRE, PAMELA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2692/4629 Rpt: 2695/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCINTYRE, PAMELA <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCIVOR, JEANNE <hr/> Contributor address; City; State; Zip Code MIROMAR LAKES, FL 33913	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE SALES		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCJUNKIN, DALE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-5736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCJUNKIN, JACLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) FLUXWORKS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCJUNKINS, PHIL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS OPERATIONS		Employer (See Instructions) UNITY TECHNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2693/4629 Rpt: 2696/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCJUNKINS, PHIL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) BUSINESS OPERATIONS		9 Employer (See Instructions) UNITY TECHNOLOGIES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKAY, EMILY <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONPROFIT CONSULTANT		Employer (See Instructions) EGM CONSULTING, LLC
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKAY, HELEN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77520	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEE, KENNETH <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEE, KENNETH <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2694/4629 Rpt: 2697/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEE, KENNETH <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEE, KENNETH <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEEN, UNA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEEVER, DARLENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKEEVER, JOSEPH <hr/> Contributor address; City; State; Zip Code SAN CLEMENTE, CA 92673	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2695/4629 Rpt: 2698/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENNA, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code WANAQUE, NJ 07465	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENZIE, CYNTHIA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENZIE, DAWN <hr/> Contributor address; City; State; Zip Code WENATCHEE, WA 98801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENZIE, JANET <hr/> Contributor address; City; State; Zip Code CARROLLTON, VA 23314	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENZIE, JOANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731-6080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2696/4629 Rpt: 2699/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENZIE, JOANN	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKENZIE, JOANN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKIERNAN-GONZALEZ, JOHN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78741		
Principal occupation / Job title (See Instructions) TEACHWR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINLEY, SUSAN L	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77043		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINLEY, SUSAN L	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77043		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2697/4629 Rpt: 2700/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, CAROL <hr/> 6 Contributor address; City; State; Zip Code CYPRESS MILL, TX 78663	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, CAROL <hr/> Contributor address; City; State; Zip Code CYPRESS MILL, TX 78663	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, CAROL <hr/> Contributor address; City; State; Zip Code CYPRESS MILL, TX 78663	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, CAROL <hr/> Contributor address; City; State; Zip Code CYPRESS MILL, TX 78663	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, PATRICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LANIER LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2698/4629 Rpt: 2701/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, PATRICE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LANIER LAW FIRM
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKINNEY, SIMONA <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL COUNSELOR		Employer (See Instructions) HUMBLE ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKNIGHT, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKNIGHT, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKNIGHT, BEATRIZ <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ERICSSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2699/4629 Rpt: 2702/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKNIGHT, BEATRIZ <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) ERICSSON
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKOWN, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN TX USA, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKOWN, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN TX USA, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCKOWN, BECKY <hr/> Contributor address; City; State; Zip Code AUSTIN TX USA, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLAIN, LISA <hr/> Contributor address; City; State; Zip Code LAKE FOREST, CA 92630	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF (DBA MCLAIN ID CONSULTING)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2700/4629 Rpt: 2703/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLARTY, DAVIS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TALENT AGENT		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLARTY, DAVIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TALENT AGENT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLARTY, DAVIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TALENT AGENT		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLARTY, SARA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79412	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLAUGHLIN, ALEX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BOATS		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2701/4629 Rpt: 2704/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLAUGHLIN, ERIC <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) PHYSICIAN ACUTE CARE SERVICES
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLAUGHLIN, LUCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096-6229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HEALTH EDUCATOR		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLAURIN, LAURIN <hr/> Contributor address; City; State; Zip Code BENBROOK, TX 76126	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLAURIN, LAURIN <hr/> Contributor address; City; State; Zip Code BENBROOK, TX 76126	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLEAISH, LAUREL <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2702/4629 Rpt: 2705/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLEAISH, LAUREL <hr/> 6 Contributor address; City; State; Zip Code MCALLEN, TX 78501	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLEAN, DOLORES <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLELAND, PEGGY <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22307	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLENNAN COUNTY DEM, GENERAL OFFICE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLEOD, BONNIE <hr/> Contributor address; City; State; Zip Code STAR, NC 27356	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2703/4629 Rpt: 2706/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLEOD, JANICE <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22309	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLIN, SHANNON <hr/> Contributor address; City; State; Zip Code THE VILLAGES, FL 32163	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FLORIDA APPEALS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLURE, NANCY <hr/> Contributor address; City; State; Zip Code WESTBOROUGH, MA 01581	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLURE, NANCY <hr/> Contributor address; City; State; Zip Code WESTBOROUGH, MA 01581	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMAHAN, CARRIE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2704/4629 Rpt: 2707/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMAHAN, CARRIE <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMAHAN, LANCE <hr/> Contributor address; City; State; Zip Code ORANGEVALE, CA 95662	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) STATE OF CALIFORNIA
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMAHAN, LANCE <hr/> Contributor address; City; State; Zip Code ORANGEVALE, CA 95662	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) STATE OF CALIFORNIA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMAHON, MARY <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMAHON, MARY <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2705/4629 Rpt: 2708/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAHON, MORRIS	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78748		
8 Principal occupation / Job title (See Instructions) TUTOR		9 Employer (See Instructions) ME
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAHON, RHONDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) MOM AND WRITER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCAHON-PRATT, DIANE	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code COVINA, CA 91722		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMANIMIE, MOLLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LAS VEGAS, NV 89141		
Principal occupation / Job title (See Instructions) SPORTS AGENT		Employer (See Instructions) WASSERMAN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMANN, AZLIN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NORTH BEND, WA 98045		
Principal occupation / Job title (See Instructions) PROJECT MANAGEMENT		Employer (See Instructions) PANGAIA CONSULTING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2706/4629 Rpt: 2709/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMATH, BRYAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$21.00
8 Principal occupation / Job title (See Instructions) EXEC		9 Employer (See Instructions) TWDB
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMEANS, TARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLAN, BEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77060	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) IDG ARCHITECTS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLAN, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021-3768	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLAN, JAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2707/4629 Rpt: 2710/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLAN, JOYCE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLAN, SUZIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MCGREGOR ISD
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLAN, SUZIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MCGREGOR
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLIAN, MARY <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27517	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCMILLIN, JENNIFER <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30319-1323	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2708/4629 Rpt: 2711/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNAB, ALICIA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) USAO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNABB, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) ST. EDWARD'S UNIVERSITY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNAMARA, MICHAEL <hr/> Contributor address; City; State; Zip Code SYLMAR, CA 91342	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNAMARA, SHANNON <hr/> Contributor address; City; State; Zip Code CONROE, TX 77385	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRAD STUDENT/ RESEARCH ASSISTANT		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNAMARA, SHANNON <hr/> Contributor address; City; State; Zip Code CONROE, TX 77385	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRAD STUDENT/ RESEARCH ASSISTANT		Employer (See Instructions) UNIVERSITY OF HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2709/4629 Rpt: 2712/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNAUGHT, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SEMI RETIRED		9 Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNAUGHT, WILLIAM <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SEMI RETIRED		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEELY, REGINA <hr/> Contributor address; City; State; Zip Code BESSEMER, AL 35022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEELY, REGINA <hr/> Contributor address; City; State; Zip Code BESSEMER, AL 35022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEIL, CAROL <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) MCN ACCOUNTING SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2710/4629 Rpt: 2713/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEILL, NITA <hr/> 6 Contributor address; City; State; Zip Code MUSTANG, OK 73064	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VETERINARIAN		9 Employer (See Instructions) NITA MCNEILL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEILL, NITA <hr/> Contributor address; City; State; Zip Code MUSTANG, OK 73064	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) NITA MCNEILL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEILL, NITA <hr/> Contributor address; City; State; Zip Code MUSTANG, OK 73064	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) NITA MCNEILL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEILL, NITA <hr/> Contributor address; City; State; Zip Code MUSTANG, OK 73064	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) NITA MCNEILL
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNELLIE, MYRA <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2711/4629 Rpt: 2714/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNELLIE, MYRA <hr/> 6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNELLIE, MYRA <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEW, CLAIRE <hr/> Contributor address; City; State; Zip Code MONMOUTH JCT, NJ 08852-3534	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNICHOLAS, HELEN <hr/> Contributor address; City; State; Zip Code MESA, AZ 85209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNIEL, BETTY <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2712/4629 Rpt: 2715/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNIEL, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNIEL, KATHRYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNUCKLES WILSON, GWENDOLYN <hr/> Contributor address; City; State; Zip Code WACO, TX 76702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNULTY, JEANEANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNULTY, JEANEANE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2713/4629 Rpt: 2716/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNUSSEN, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code CHAMPAIGN, IL 61822	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNUTT, PHILLIP <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ORGANIZER/CONCESSIONS		Employer (See Instructions) MIKE MCNUTT
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNUTT, PHILLIP <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ORGANIZER/CONCESSIONS		Employer (See Instructions) MIKE MCNUTT
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNUTT SHOFKOM, SUSAN <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) TEXAS TECHNOLOGY SUPPORT
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNUTT SHOFKOM, SUSAN <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) TEXAS TECHNOLOGY SUPPORT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2714/4629 Rpt: 2717/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHAIL, HEATHER A <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, VA 22204	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DANCE INSTRUCTOR		9 Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHAIL, HEATHER A <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DANCE INSTRUCTOR		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHEE, KELLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FUNDRAISER		Employer (See Instructions) MD ANDERSON
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHEE, KELLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FUNDRAISER		Employer (See Instructions) MD ANDERSON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHEETERS, MORGAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED (MCPHEETERS LAW, PLLC)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2715/4629 Rpt: 2718/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHERSON, ANNA <hr/> 6 Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) CITY PLANNER		9 Employer (See Instructions) ATLANTIS GROUP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHERSON, JAMES <hr/> Contributor address; City; State; Zip Code HARRISON, AR 72601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCPHERSONN, BERNADETTE <hr/> Contributor address; City; State; Zip Code RUTHERFORD, NJ 07070	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MILLENNIUM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCQUAID, PETER <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCQUAID, PETER <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2716/4629 Rpt: 2719/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCQUEEN, ANNIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77079	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MARKETING/WRITER		9 Employer (See Instructions) KRJ
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCQUEEN, DAWN <hr/> Contributor address; City; State; Zip Code SWANSEA, IL 62226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCQUEEN, PENLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCRAE, NANCY <hr/> Contributor address; City; State; Zip Code PEPPERELL, MA 01463	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCREE, BRIANA <hr/> Contributor address; City; State; Zip Code MAPLE VALLEY, WA 98038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2717/4629 Rpt: 2720/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCREYNOLDS, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code SEBASTOPOL, CA 95472	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPY		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCRITCHIE, KATHERINE M <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCRITCHIE, KATHERINE M <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCROBERTS, HUNT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INDEPENDENT LANDMAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCSHAN, LORETTA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CARE TAKER		Employer (See Instructions) ACCOMMODATIVE HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2718/4629 Rpt: 2721/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCSHAY, JULI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) CONCIERGE BUSINESS SOLUTIONS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCSHERRY, NOELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007-3716	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TECHNICAL TRAINER		Employer (See Instructions) ROCRICH
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCSHERRY, NOELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) TECHNICAL TRAINER		Employer (See Instructions) ROCRICH AGV SOLUTIONS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCSWEENY, JOHN <hr/> Contributor address; City; State; Zip Code CASTLE ROCK, CO 80108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCTEIGUE JR, PATRICK <hr/> Contributor address; City; State; Zip Code PEACHTREE CITY, GA 30269	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2719/4629 Rpt: 2722/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCVEIGH, ROSE <hr/> 6 Contributor address; City; State; Zip Code MIAMI BEACH, FL 33240	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWALTERS, THOMAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWATTERS, KEN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GODREJ AMERICAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWILLIAMS, JAMES <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWILLIAMS, JAMES <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2720/4629 Rpt: 2723/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWILLIAMS, TERESA <hr/> 6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93108	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWILLIAMS, TERESA <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93108	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWILLIAMS, W ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$79.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, MARSTON <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2721/4629 Rpt: 2724/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, MARSTON <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, WILSON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) TRADER		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOR, WILSON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRADER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOWS, ELISE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) STAX
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEADOWS, PATRICIA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2722/4629 Rpt: 2725/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEANOR, GERTRUDE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEANS, CONSTANCE <hr/> Contributor address; City; State; Zip Code OLYMPIA FIELDS, IL 60461	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEAR, SHARON <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEAR, SHARON <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MECHALY, ORLY <hr/> Contributor address; City; State; Zip Code OLNEY, MD 20830	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYSTS		Employer (See Instructions) WOODBOURNE SOLUTION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2723/4629 Rpt: 2726/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDAK, RUTH <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97221	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) LEGACY HEALTH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDFORD, MICHAEL <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MANNING FULTON & SKINNER
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDFORD, MICHAEL <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MANNING FULTON & SKINNER
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDFORD, MICHAEL <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MANNING FULTON & SKINNER
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDINA, ANITA <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LITIGATION COORDINATOR		Employer (See Instructions) VIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2724/4629 Rpt: 2727/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDINA, LISA MARIE <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78463	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) DOCTOR		9 Employer (See Instructions) SELF EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDINA, MARIE <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) MANSFIELD ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDINA-CUE, ARTHUR <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT SUPPORT		Employer (See Instructions) ALTISOURCE SOLUTIONS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDLENKA, CARLA <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) ABOHNS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDLENKA, CARLA <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2725/4629 Rpt: 2728/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDLEY, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, ADAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ADAM MEDRANO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, DIANA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, DIANA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, DIANA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2726/4629 Rpt: 2729/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, DIANA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, PAULINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) DALLAS COUNTY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDRANO, PAULINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) DALLAS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEED, ALEX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CYBERSECURITY ANALYST		Employer (See Instructions) ATLISSIAN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEED, ALEX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CYBERSECURITY ANALYST		Employer (See Instructions) ATLISSIAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2727/4629 Rpt: 2730/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEED, ALEX <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CYBERSECURITY ANALYST		9 Employer (See Instructions) ATLISSIAN
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEHAN, GLORIA <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEHAN, PADDY <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEK, PATRICIA <hr/> Contributor address; City; State; Zip Code WARSAW, NY 14569	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOLUNTEER COORDINATOR.		Employer (See Instructions) CCOFWNY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEK, PATRICIA <hr/> Contributor address; City; State; Zip Code WARSAW, NY 14569	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VOLUNTEER COORDINATOR.		Employer (See Instructions) CCOFWNY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2728/4629 Rpt: 2731/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEKER, COLLEEN <hr/> 6 Contributor address; City; State; Zip Code JACKSONVILLE, FL 32250	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) INDEPENDANT CONTRACTOR		9 Employer (See Instructions) SHIPT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEKER, COLLEEN <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32250	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) INDEPENDANT CONTRACTOR		Employer (See Instructions) SHIPT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEGETT, JOYCE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY COLLEGES OF CHICAGO
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEHAFFY, MARY <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87505	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) LANDSCAPE ARCHITECT		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEHARG, HEATHER <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2729/4629 Rpt: 2732/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEHRTENS, CAITLIN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77054	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) FREELANCE		9 Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEHTA, KAMLESH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) MEHTA BUILDERS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEHTA, MILI <hr/> Contributor address; City; State; Zip Code IRVINE, CA 92620	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEHTA, NEHA <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15241	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EPIDEMIOLOGIST		Employer (See Instructions) PUBLIC HEALTH
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEIBACH, INA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2730/4629 Rpt: 2733/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEIBACH, INA	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code NEW YORK, NY 10023		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEIER, CLARK	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEIER, NIESSA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) MIDWIFE		Employer (See Instructions) FRONTIER NURSING UNIVERSITY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEIER, NIESSA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) MIDWIFE		Employer (See Instructions) FRONTIER NURSING UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEINZER, SARAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MIDLAND, TX 79705		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2731/4629 Rpt: 2734/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEISEL, ROBERT <hr/> 6 Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEISEL, ROBERT <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEISEL, ROBERT <hr/> Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEISEL, VALERIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELANSON, CHRISTIANNE <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401-2503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2732/4629 Rpt: 2735/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELANSON, CHRISTIANNE <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401-2503	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) RETIRED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELANSON, CHRISTIANNE <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401-2503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) RETIRED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELCER, HANNAH <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELENDEZ, CATHERINE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELGAARD TWORK, PEGGY <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37934	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2733/4629 Rpt: 2736/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELGAARD TWORK, PEGGY <hr/> 6 Contributor address; City; State; Zip Code KNOXVILLE, TN 37934	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLARD, JASON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) HISTORIAN		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLE, BRIAN <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLO, RACHEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RICHARDSON ISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLO, RACHEL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RICHARDSON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2734/4629 Rpt: 2737/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLON-WERCH, MICHELLE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78759		
8 Principal occupation / Job title (See Instructions) ASSISTANT GC		9 Employer (See Instructions) TMRS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLON-WERCH, MICHELLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) ASSISTANT GC		Employer (See Instructions) TMRS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLON-WERCH, MICHELLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) ASSISTANT GC		Employer (See Instructions) TMRS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLOR-CRUMMEY, CYNTHIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLOR-CRUMMEY, CYNTHIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2735/4629 Rpt: 2738/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLOW, BONNIE <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELLOW, BONNIE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELO, TINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELROSE, JANE <hr/> Contributor address; City; State; Zip Code SARASOTA, FL 34236	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, CARYN <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MEDIA RELATIONS		Employer (See Instructions) CARYN MELTON PR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2736/4629 Rpt: 2739/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, LYNN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, LYNN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, LYNN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, LYNN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, LYNN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2737/4629 Rpt: 2740/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELTON, LYNN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELVIN, MAMIE (DEE) <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENA, BENJAMIN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) TEXAS LOTTERY COMMISSION
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENA, BENJAMIN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) TEXAS LOTTERY COMMISSION
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENA, BENJAMIN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) SYSTEMS ANALYST		Employer (See Instructions) TEXAS LOTTERY COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2738/4629 Rpt: 2741/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENARD, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE BROKER		9 Employer (See Instructions) ATX REAL ESTATE EXPERTS LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENARD, ROBERT <hr/> Contributor address; City; State; Zip Code POMPANO BEACH, FL 33062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDELOVICH, LILACH <hr/> Contributor address; City; State; Zip Code VALLEY VILLAGE, CA 91607	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ACTOR		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDENHALL, JULIE <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) CHRISTUS HEALTH SYSTEM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDENHALL, SHERYL <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2739/4629 Rpt: 2742/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDEZ, EILEEN M <hr/> 6 Contributor address; City; State; Zip Code LAGRANGE PK, IL 60526	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDEZ, MARGARET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDEZ, MARGARET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDEZ, MARGARET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDIETA, EZEQUIEL <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2740/4629 Rpt: 2743/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDIOLA, IRA JEAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HARLINGEN, TX 78552-5137		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDIOLA, JUNO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KING OF PRUSSIA, PA 19406		
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) BRIAN BROTHERS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDOZA, ALEXAVIER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77017		
Principal occupation / Job title (See Instructions) OPERATIONS COORDINATOR		Employer (See Instructions) HARRIS COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDOZA, BRIAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HARLINGEN, TX 78552		
Principal occupation / Job title (See Instructions) NURSING		Employer (See Instructions) RGV WOUND CARE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDOZA, DAVID	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77091		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2741/4629 Rpt: 2744/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENDOZA, ELVA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENEFFEE, BRUCE <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENEFFEE, BRUCE <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENEDEZ, LOUIS <hr/> Contributor address; City; State; Zip Code ELK GROVE, CA 95758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENG, YU <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) ONCOR ELECTRIC DELIVERY, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2742/4629 Rpt: 2745/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENIFEE, VANDELLA <hr/> 6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENIFEE, VANDELLA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENNELLA, JENNI <hr/> Contributor address; City; State; Zip Code LONG BEACH, NY 11561	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETAIL STRATEGIST		Employer (See Instructions) JENNI MENNELLA (SELF EMPLOYED)
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENNELLA, MATHEW <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) M SQUARED SPECIALTY GOODS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENON, JAYANT <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94303	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) NAHLIA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2743/4629 Rpt: 2746/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENZEL, MINDI	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78748		
8 Principal occupation / Job title (See Instructions) BUSINESS ANALYST		9 Employer (See Instructions) TXDOT
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENZEL, MINDI	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) TXDOT
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENZEL, MINDI	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) TXDOT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MENZIES, BETHANY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NEW YORK, NY 10014		
Principal occupation / Job title (See Instructions) FOUNDER		Employer (See Instructions) BETHANY MENZIES
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCADO, ALMA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HUMBLE, TX 77338		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2744/4629 Rpt: 2747/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCADO, RODERICK <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$65.00
8 Principal occupation / Job title (See Instructions) MARKETING MANAGER		9 Employer (See Instructions) DELL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCADO, WILLIAM <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCER, CHRISSY <hr/> Contributor address; City; State; Zip Code PORT NECHES, TX 77651	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) MCT CREDIT UNION
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCER, CHRISSY <hr/> Contributor address; City; State; Zip Code PORT NECHES, TX 77651	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) MCT CREDIT UNION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCER, FRANCES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) PEGASUS SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2745/4629 Rpt: 2748/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERCER, FRANCES <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75202	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATION		9 Employer (See Instructions) PEGASUS SCHOOL
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, ALISSA <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92026	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) SCRIPPS HEALTH
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, CATHY <hr/> Contributor address; City; State; Zip Code OSKALOOSA, IA 52577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MEMBERSHIP REP		Employer (See Instructions) NIELSEN TV RATINGS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, MARK <hr/> Contributor address; City; State; Zip Code ATHENS, TX 75751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC INFORMATION OFFICER		Employer (See Instructions) TRINITY VALLEY COMMUNITY COLLEGE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, MARK <hr/> Contributor address; City; State; Zip Code ATHENS, TX 75751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC INFORMATION OFFICER		Employer (See Instructions) TRINITY VALLEY COMMUNITY COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2746/4629 Rpt: 2749/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, MARK <hr/> 6 Contributor address; City; State; Zip Code ATHENS, TX 75751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PUBLIC INFORMATION OFFICER		9 Employer (See Instructions) TRINITY VALLEY COMMUNITY COLLEGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, VICKI <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98012	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, VICKI <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREDITH, VICKI <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98012	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREMBECK, BENJAMIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2747/4629 Rpt: 2750/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREMBECK, BENJAMIN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77043	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEREMBECK, BENJAMIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERFISH, BETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) DIRECTOR, SCHOOL OF ART		Employer (See Instructions) UH
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERFISH, GERALD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERFISH, SHERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2748/4629 Rpt: 2751/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERIZAN, MARK <hr/> 6 Contributor address; City; State; Zip Code SHERWOOD, OR 97140-8654	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERKER, BRUCE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERKLEY, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SBSB-EASTHAM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERLEY, ANN <hr/> Contributor address; City; State; Zip Code SLINGERLANDS, NY 12159	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRELL, PATRICK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TAX POLICY ANALYST		Employer (See Instructions) TEXAS STATE COMPTROLLER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2749/4629 Rpt: 2752/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRELL, PATRICK <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78753	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TAX POLICY ANALYST		9 Employer (See Instructions) TEXAS STATE COMPTROLLER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, ELIZABETH <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, SALLY <hr/> Contributor address; City; State; Zip Code ACTON, MA 01720	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, TRISH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739-1728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2750/4629 Rpt: 2753/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KBR
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KBR
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KBR
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KBR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2751/4629 Rpt: 2754/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ALLEN, TX 75002		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) KBR
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALLEN, TX 75002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2752/4629 Rpt: 2755/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KBR
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRILL, WALTER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2753/4629 Rpt: 2756/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRIMAN, GEORGE <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11223	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ELECTRICIAN		9 Employer (See Instructions) GRAVESEND SYSTEMS INC
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERRITT, STEPHEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOLUTIONS ARCHITECT		Employer (See Instructions) EXL SERVICE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERSHON, KATHRYN <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40207	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERSHON, KATHRYN <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40207	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERSHON, KATHRYN <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2754/4629 Rpt: 2757/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERSHON, KATHRYN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LOUISVILLE, KY 40207		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERSHON, KATHRYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOUISVILLE, KY 40207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERSON, ROSE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PRESCOTT, AZ 86305		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERUGUMALA, KESAVA RAO	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code DUBLIN, CA 94568		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AUTODESK
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERWIN, DIANE	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code MARSHFIELD, WI 54449		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2755/4629 Rpt: 2758/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERWIN, DIANE <hr/> 6 Contributor address; City; State; Zip Code MARSHFIELD, WI 54449	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MERWIN, DIANE <hr/> Contributor address; City; State; Zip Code MARSHFIELD, WI 54449	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESH, DEBORAH <hr/> Contributor address; City; State; Zip Code NASHVILLE, NC 27856	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESMAN, CAROLINE <hr/> Contributor address; City; State; Zip Code FLORENCE, OR 97439	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESNER, DOUGLAS <hr/> Contributor address; City; State; Zip Code PUEBLO, CO 81005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED RN		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2756/4629 Rpt: 2759/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSER, CHRIS <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76104	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) SOLUTION ARCHITECT		9 Employer (See Instructions) DATABRICKS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSER, DARLENE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSINA, GRACE <hr/> Contributor address; City; State; Zip Code NORTH FORT MYERS, FL 33917	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSINA, GRACE <hr/> Contributor address; City; State; Zip Code NORTH FORT MYERS, FL 33917	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSINGER, BRUS <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) AAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2757/4629 Rpt: 2760/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSINGER, BRUS <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PILOT		9 Employer (See Instructions) AAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSINGER, BRUS <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) AAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSINGER, BRUS <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) AAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSNER, EMILY <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SMALL-BUSINESS		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSNER, EMILY <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SMALL-BUSINESS		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2758/4629 Rpt: 2761/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METCALF, MARK <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76133	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METCALF, MARK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METCALF, MARK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METCALF, MARLENE <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METHOLA, JOELLA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT DISTRICT ATTORNEY		Employer (See Instructions) DISTRICT ATTORNEY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2759/4629 Rpt: 2762/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METNI, ALAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78730	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) IFLY HOLDINGS, LLC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METZ, JEFFREY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METZ, JEFFREY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) METZINGER, VENITA <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, ALANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2760/4629 Rpt: 2763/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, ALANA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77069	7 Amount of Contribution (\$) \$45.75
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, JAMES <hr/> Contributor address; City; State; Zip Code CONROE, TX 77348	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, JAMES <hr/> Contributor address; City; State; Zip Code CONROE, TX 77348	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, JULIA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) RRISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, KATHLEEN <hr/> Contributor address; City; State; Zip Code DESTIN, FL 32541	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) SALES ASSOCIATE		Employer (See Instructions) HARVEST HOUSE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2761/4629 Rpt: 2764/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code DESTIN, FL 32541	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) SALES ASSOCIATE		9 Employer (See Instructions) HARVEST HOUSE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, KAY <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) NEXUS HORIZONS LLC
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, LINDA <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BOOKSTORE OWNER		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, LINDA <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BOOKSTORE OWNER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARC <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2762/4629 Rpt: 2765/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARC <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2763/4629 Rpt: 2766/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2764/4629 Rpt: 2767/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2765/4629 Rpt: 2768/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, MARJORIE J <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, STEVEN <hr/> Contributor address; City; State; Zip Code SPRINGFIELD, IL 62704-3454	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) STEVEN W MEYER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, VICTORIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2766/4629 Rpt: 2769/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, VICTORIA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10011	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER III, FRED <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER III, FRED <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER III, FRED <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER III, FRED <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2767/4629 Rpt: 2770/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, AMBER	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HURST, TX 76053		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) TCC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, AMBER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HURST, TX 76053		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TCC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, LUCAS	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) GOVERNMENTAL AFFAIRS CONSULTANT		Employer (See Instructions) GOVERNMENTAL AFFAIRS LLC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYERS, LUCAS	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) GOVERNMENTAL AFFAIRS CONSULTANT		Employer (See Instructions) GOVERNMENTAL AFFAIRS LLC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZA, DANIEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SPRING, TX 77373		
Principal occupation / Job title (See Instructions) SPECIALIST		Employer (See Instructions) ALDINE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2768/4629 Rpt: 2771/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZA, DENISE <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78603	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PLUMBER		9 Employer (See Instructions) PEANUT PLUMBING
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZA, DENISE <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78603	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PLUMBER		Employer (See Instructions) PEANUT PLUMBING
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZA, DENISE <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78603	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PLUMBER		Employer (See Instructions) PEANUT PLUMBING
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEZOFF, KATHLEEN M <hr/> Contributor address; City; State; Zip Code GALLUP, NM 87301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAEL PEACOCK, JASON <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) ADMISSIONS OFFICER		Employer (See Instructions) UNIV OF NORTH TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2769/4629 Rpt: 2772/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, JILL	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code WACO, TX 76710		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, JILL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, JUDITH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, MICKEY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, ROBERT	Amount of Contribution (\$) \$2.67
Contributor address; City; State; Zip Code HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2770/4629 Rpt: 2773/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELS, SARA <hr/> Contributor address; City; State; Zip Code LOTT, TX 76656	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) BSWHP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAELSEN, HEDRICH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHAL, EDWARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICHON, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) STEWART TITLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2771/4629 Rpt: 2774/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICKELBERRY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code CHAPEL HILL, NC 27514	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) EDITOR		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICKELSON, KIMBERLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OLSON & OLSON, LLP/KMICKELSON PC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICKELSON, KIMBERLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OLSON & OLSON, LLP/KMICKELSON PC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICKENBERG, JULIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MICKEY, SHARON <hr/> Contributor address; City; State; Zip Code OZARK, MO 65721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2772/4629 Rpt: 2775/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDDLETON, AMBER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77035	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) DEPELCHIN
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDDLETON, BRIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77487	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MIDDLETON LAW FIRM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDDLETON, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) WORLEY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDDLETON, TYLER <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDDLETON, TYLER <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37204	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2773/4629 Rpt: 2776/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDDLETON, TYLER <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37204	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIELKE, HOWARD <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98105	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIELKE, HOWARD <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98105	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIERTSCHIN, JOE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REALTOR/PROPERTY MGMT		Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIHALOPOULOS, FRANK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FOUNDER/CEO		Employer (See Instructions) CORINTH PROPERTIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2774/4629 Rpt: 2777/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIHARA, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SAN ANTONIO LEGAL SERVICES ASSOCIATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIKE JR, MIKE <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIKE JR, MIKE <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILAZZO, CHRISTINE ASBERRY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOUTHERN METHODIST UNIVERSITY		Employer (See Instructions) GRAPHIC DESIGNER
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, CHANTELL <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2775/4629 Rpt: 2778/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, DAMON <hr/> 6 Contributor address; City; State; Zip Code HUMBLE, TX 77345	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PROCESS OPERATOR		9 Employer (See Instructions) CHEVRON-PHILLIPS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, LUCILLE <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, MATTHEW <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039-1750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GIS APPLICATIONS ADMINISTRATOR		Employer (See Instructions) EOG RESOURCES, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, MATTHEW <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039-1750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GIS APPLICATIONS ADMINISTRATOR		Employer (See Instructions) EOG RESOURCES, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLAR, GABRIEL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2776/4629 Rpt: 2779/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLAS, DIMITRI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PARTNER		9 Employer (See Instructions) NORTON ROSE FULBRIGHT
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLAS, DIMITRI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) NORTON ROSE FULBRIGHT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLEDGE, SAMUEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ALAN <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20852	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ALAN <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20852	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2777/4629 Rpt: 2780/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ALAN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ELGIN, TX 78621		
8 Principal occupation / Job title (See Instructions) FINANCE		9 Employer (See Instructions) TRAVIS COUNTY
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ALAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ELGIN, TX 78621		
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) TRAVIS COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ALISON	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401		
Principal occupation / Job title (See Instructions) ELIGIBILITY COUNSELOR		Employer (See Instructions) ECI
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MIAMI, FL 33186		
Principal occupation / Job title (See Instructions) STUDENT SERVICES		Employer (See Instructions) FIU
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, B	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) WCA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, BEN <hr/> 6 Contributor address; City; State; Zip Code ARGYLE, TX 76226	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NONE		9 Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, BEN <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, BERNARD <hr/> Contributor address; City; State; Zip Code HAYWARD, CA 94542	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, BOB <hr/> Contributor address; City; State; Zip Code GLEN ROSE, TX 76043	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CARA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2779/4629 Rpt: 2782/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CARA <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CAROLYN <hr/> Contributor address; City; State; Zip Code MOUNT SHASTA, CA 96067	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CLARENCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CONNIE <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CYRAL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SPECIAL ED CONSULTANT		Employer (See Instructions) TX SCHOOL FOR THE BLIND AND VISUALLY IMPAIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2780/4629 Rpt: 2783/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CYRAL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SPECIAL ED CONSULTANT		9 Employer (See Instructions) TX SCHOOL FOR THE BLIND AND VISUALLY IMPAIRED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, CYRAL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756-3217	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) EDUCATION CONSULTANT		Employer (See Instructions) TSBVI
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DENISE <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DENISE <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DENISE <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2781/4629 Rpt: 2784/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DENISE <hr/> 6 Contributor address; City; State; Zip Code AZLE, TX 76020	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DENISE <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DONALYN <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LITERACY CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DONALYN <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LITERACY CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DONALYN <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LITERACY CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2782/4629 Rpt: 2785/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, DONALYN <hr/> 6 Contributor address; City; State; Zip Code BEDFORD, TX 76022	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LITERACY CONSULTANT		9 Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ERIK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SANDER ENGINEERING CORP
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, FAYE M <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, HARVEY <hr/> Contributor address; City; State; Zip Code BALDWIN, IA 52207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TRUCKER		Employer (See Instructions) RICHARDSON
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, HARVEY <hr/> Contributor address; City; State; Zip Code BALDWIN, IA 52207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TRUCKER		Employer (See Instructions) RICHARDSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2783/4629 Rpt: 2786/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JAMES <hr/> 6 Contributor address; City; State; Zip Code CLINTON, ME 04927	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JAN <hr/> Contributor address; City; State; Zip Code MILLBROOK, NY 12545	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TEXAS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JANET AND ROBERT <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JENNIFER <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2784/4629 Rpt: 2787/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JESSICA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ST. GEORGE EPISCOPAL SCHOOL
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JESSICA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ST. GEORGE EPISCOPAL SCHOOL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, JULIE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KATHRYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENNETH	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code MOUNT PROSPECT, IL 60056-1951		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2785/4629 Rpt: 2788/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENNETH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code MOUNT PROSPECT, IL 60056-1951		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENNETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MOUNT PROSPECT, IL 60056-1951		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENNETH	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code MOUNT PROSPECT, IL 60056-1951		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENT C	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) CLERGY		Employer (See Instructions) NONE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENT C	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2786/4629 Rpt: 2789/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KENT C <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CLERGY		9 Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KIM <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, KRISTI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723-1809	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, LISA <hr/> Contributor address; City; State; Zip Code PORTLAN, OR 97219	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, LISA <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2787/4629 Rpt: 2790/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, LISA <hr/> 6 Contributor address; City; State; Zip Code BREMOND, TX 76629	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, LISA <hr/> Contributor address; City; State; Zip Code BREMOND, TX 76629	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARIAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARJORIE <hr/> Contributor address; City; State; Zip Code TOLEDO, IA 52342	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2788/4629 Rpt: 2791/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MARY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PAT <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PAT <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PAT <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PAT <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2789/4629 Rpt: 2792/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PATRICK <hr/> 6 Contributor address; City; State; Zip Code CHENEY, WA 99004	7 Amount of Contribution (\$) \$2.08
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PATRICK <hr/> Contributor address; City; State; Zip Code CHENEY, WA 99004	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PATRICK <hr/> Contributor address; City; State; Zip Code CHENEY, WA 99004	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PAULINE <hr/> Contributor address; City; State; Zip Code TROY, NY 12180	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RACHEL <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) MOLINA HEALTHCARE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2790/4629 Rpt: 2793/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RACHEL <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) HCSC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RACHEL <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) MOLINA HEALTHCARE OF TEXAS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RICHARD <hr/> Contributor address; City; State; Zip Code LAGUNA VISTA, TX 78578	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2791/4629 Rpt: 2794/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2792/4629 Rpt: 2795/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LOCKE LORD LLP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LOCKE LORD LLP
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ROBERT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LOCKE LORD LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2793/4629 Rpt: 2796/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RUDOLPH <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75229	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RUDOLPH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, SARAH <hr/> Contributor address; City; State; Zip Code BRYN MAWR, PA 19010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, SARAH <hr/> Contributor address; City; State; Zip Code BRYN MAWR, PA 19010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, STEVEN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75083-5098	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) STEVEN MILLER & CO LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2794/4629 Rpt: 2797/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, STEVEN <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75083-5098	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) STEVEN MILLER & CO LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, TAMARA <hr/> Contributor address; City; State; Zip Code NOBLESVILLE, IN 46060	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, THOMAS <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ENSEO
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, VIRGINIA <hr/> Contributor address; City; State; Zip Code NORTH BETHESDA, MD 20852	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		Employer (See Instructions) VIRGINIA MILLER COMMUNICATIONS LLC
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ZACK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2795/4629 Rpt: 2798/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, ZACK <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		9 Employer (See Instructions) AMERICAN AIRLINES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER-KRAUSE, ROSE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLIKAN, JACK <hr/> Contributor address; City; State; Zip Code TACOMA, WA 98407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLNER, MARK <hr/> Contributor address; City; State; Zip Code MEDFORD, OR 97501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) TERRA FIRMA HOME
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, CARLA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOVELIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2796/4629 Rpt: 2799/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, CARLA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78745		
8 Principal occupation / Job title (See Instructions) NOVELIST		9 Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, CARLA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) NOVELIST		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, DANIEL	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025		
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) SYNCHRO
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, MARGARET	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code AUSTIN, TX 78722		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, MARGARET	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78722		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2797/4629 Rpt: 2800/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, PATRICIA	7 Amount of Contribution (\$) \$120.00
6 Contributor address; City; State; Zip Code ROUND TOP, TX 78954		
8 Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		9 Employer (See Instructions) BISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, ROSANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROSANNE MESSINEO MILLS, ATTORNEY AND
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, ROSANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FDIC
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, ROSANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FDIC
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILNE, CYNTHIA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2798/4629 Rpt: 2801/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILNE, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILNE, CYNTHIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILNE, CYNTHIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILNER, DEBORAH ("CARLY") <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) FOGLER, BRAR, O'NEIL & GRAY LLP
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIMS, CHELBI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) TEXAS CHARTER SCHOOLS ASSOCIATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2799/4629 Rpt: 2802/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIMS, CHELBI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) LOBBYIST		9 Employer (See Instructions) TEXAS CHARTER SCHOOLS ASSOCIATION
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIMS, JAMIE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ROSE LAWN CEMETERY		Employer (See Instructions) MANAGER
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIMS, JAMIE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ROSE LAWN CEMETERY		Employer (See Instructions) MANAGER
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIMS, MORRIS <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINCBERG, ERIN <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		Employer (See Instructions) RE-ELECT KAMALA HARRIS 2014

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2800/4629 Rpt: 2803/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINCBERG, ERIN <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		9 Employer (See Instructions) RE-ELECT KAMALA HARRIS 2014
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINCHAK, MARTHA J <hr/> Contributor address; City; State; Zip Code PROCTOR, MN 55810	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINDEN, SHELLEY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINDEN, SHELLEY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINDES, PAULA <hr/> Contributor address; City; State; Zip Code CLEVELAND HTS, OH 44118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2801/4629 Rpt: 2804/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINDES, PAULA <hr/> 6 Contributor address; City; State; Zip Code CLEVELAND HTS, OH 44118	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINDES, PAULA <hr/> Contributor address; City; State; Zip Code CLEVELAND HTS, OH 44118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINER, LESLIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINER, MICHAEL <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINER, RICHARD <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138-2241	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) GOOGLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2802/4629 Rpt: 2805/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINGE, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79924	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINGOIA, DARCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINICA, BEVERLY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINKEMANN, PAMELA <hr/> Contributor address; City; State; Zip Code ANCHORAGE, AK 99503	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINKOFF, ELAINE <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20878	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2803/4629 Rpt: 2806/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINOR, LOUIE <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76541	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		9 Employer (See Instructions) BELL COUNTY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINOR, STEPHEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78222	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) ALAMO COMMUNITY COLLEGE DISTRICT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINSUK, SHARON <hr/> Contributor address; City; State; Zip Code BELMONT, CA 94002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINSUK, SHARON <hr/> Contributor address; City; State; Zip Code BELMONT, CA 94002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINSUK, SHARON <hr/> Contributor address; City; State; Zip Code BELMONT, CA 94002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2804/4629 Rpt: 2807/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTER, REBECCA <hr/> 6 Contributor address; City; State; Zip Code OSSINING, NY 10562	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTON, DANNY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SIRIUS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, EVAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF COMMUNICATIONS		Employer (See Instructions) ARNOLD VENTURES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, ROBERTA <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33472	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, ROBERTA <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2805/4629 Rpt: 2808/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, ROBERTA <hr/> 6 Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33472	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, ROBERTA <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, ROBERTA <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, SILVIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) LAW OFFICE OF SILVIA MINTZ
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINTZ, SILVIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) LAW OFFICE OF SILVIA MINTZ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2806/4629 Rpt: 2809/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINUETE, JOANNE <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIOLI, TERESA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JOURNALIST		Employer (See Instructions) UT AUSTIN
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRAMONTEZ, LUCYANN <hr/> Contributor address; City; State; Zip Code WACO, TX 76711	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) JP JUDGE		Employer (See Instructions) MCLENNAN COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, BILLIE <hr/> Contributor address; City; State; Zip Code ACME, PA 15610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, BILLIE <hr/> Contributor address; City; State; Zip Code ACME, PA 15610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2807/4629 Rpt: 2810/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, MARY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PITTSGROVE TOWNSHIP, NJ 08318		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, MARY KIMBERLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PEARLAND, TX 78583		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) KIM MIRANDA
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, MARY KIMBERLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PEARLAND, TX 78583		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) KIM MIRANDA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRANDA, ROBERTO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRELES, MARGARET	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2808/4629 Rpt: 2811/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRELES, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92107	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIRTHES, SILVIA <hr/> Contributor address; City; State; Zip Code BUSHKILL, PA 18324	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISRA, SARMITA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252-5703	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) SELF-EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISRA, SUKANYA <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) SC JOHNSON
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISTRETTA, CASSIE <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) SENIOR LIVING PROPERTIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2809/4629 Rpt: 2812/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISTRETТА, CASSIE <hr/> 6 Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) HEALTHCARE		9 Employer (See Instructions) SENIOR LIVING PROPERTIES
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISTRETТА, TONI-ANN <hr/> Contributor address; City; State; Zip Code HOLIDAY LAKES, TX 77515	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BIostatistician		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISTRETТА, TONI-ANN <hr/> Contributor address; City; State; Zip Code HOLIDAY LAKES, TX 77515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BIostatistician		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MISTRETТА, TONI-ANN <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, ASHLEY <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2810/4629 Rpt: 2813/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, BILLIE <hr/> 6 Contributor address; City; State; Zip Code CORSICANA, TX 75110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, BILLIE <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, BILLIE <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, CARMEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, CHARLES <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2811/4629 Rpt: 2814/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, CRISTINA <hr/> 6 Contributor address; City; State; Zip Code PROVIDENCE, RI 02906	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) COASTAL MEDICAL
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, DONNA <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) HOUSTON METHODIST HOSPITAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, HANNAH <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRANTS SPECIALIST		Employer (See Instructions) TEXAS A&M UNIVERSITY-CORPUS CHRISTI
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, HANNAH <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRANTS SPECIALIST		Employer (See Instructions) TEXAS A&M UNIVERSITY-CORPUS CHRISTI
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JACKSON <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) THAI CHRISTIAN SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2812/4629 Rpt: 2815/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JAMES <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, KATE <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HIGH SCHOOL TEACHER		Employer (See Instructions) FT. BEND INDEPENDENT SCHOOL DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2813/4629 Rpt: 2816/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, LAURA <hr/> 6 Contributor address; City; State; Zip Code REDWOOD CITY, CA 94061	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) SWIM COACH		9 Employer (See Instructions) ALTO SWIM CLUB
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, LINDA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 11101	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, LINDA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, MARGARET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, MARLOR <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2814/4629 Rpt: 2817/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, PATTY <hr/> 6 Contributor address; City; State; Zip Code NEW PORT RICHEY, FL 34655	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, TED <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GENESYS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, TRACIE <hr/> Contributor address; City; State; Zip Code BOWIE, MD 20721	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, VELINDA W. <hr/> Contributor address; City; State; Zip Code OREM, UT 84058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) WEST JORDAN CARE CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, VELINDA W. <hr/> Contributor address; City; State; Zip Code OREM, UT 84058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) WEST JORDAN CARE CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2815/4629 Rpt: 2818/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL JR, G LEWIS <hr/> 6 Contributor address; City; State; Zip Code GADSDEN, AL 35901	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL JR, G LEWIS <hr/> Contributor address; City; State; Zip Code GADSDEN, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL JR, G LEWIS <hr/> Contributor address; City; State; Zip Code GADSDEN, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL JR, G LEWIS <hr/> Contributor address; City; State; Zip Code GADSDEN, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL JR, G LEWIS <hr/> Contributor address; City; State; Zip Code GADSDEN, AL 35901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2816/4629 Rpt: 2819/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITHA, IQBAL <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MITHA LAW FIRM, P.C.
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITLYNG, JOSEPH <hr/> Contributor address; City; State; Zip Code GRAND BLANC, MI 48439	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITRA, SOME <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77249	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SOFTWARE ARCHITECT/CERTIFIED AUDITOR/STUDENT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITRE, TONANTZIN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) PROGRAMA OFFICER		Employer (See Instructions) CZI
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITTAG, ERIKA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-4006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITTELSTEDT, VICTORIA <hr/> 6 Contributor address; City; State; Zip Code N RICHLAND HILLS, TX 76182	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITTELSTEDT, VICTORIA <hr/> Contributor address; City; State; Zip Code N RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIX, DARCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ANTIQUE DEALER
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIX, DARCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ANTIQUE DEALER
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIX, DARCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ANTIQUE DEALER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2818/4629 Rpt: 2821/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIX, DARCY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) ANTIQUE DEALER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIYATAKE, CALVIN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIYAWAKI, ASHLEY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIGITAL PRODUCER		Employer (See Instructions) FREELANCE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIZELL, EMOGENE <hr/> Contributor address; City; State; Zip Code FORESTVILLE, MD 20747	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBERLY, STEVEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75223	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HEAD OF FINANCE		Employer (See Instructions) FUSIONPKG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBERLY, STEVEN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75223	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) HEAD OF FINANCE		9 Employer (See Instructions) FUSIONPKG
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBERLY, STEVEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75223	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HEAD OF FINANCE		Employer (See Instructions) FUSIONPKG
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBERLY-VILAUBI, ADRIENNE <hr/> Contributor address; City; State; Zip Code LOS GATOS, CA 95033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) FREMONT UNION HSD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBLEY, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RADIO STATION MANAGER/ON-AIR PERSONALITY		Employer (See Instructions) RECORDING LIBRARY OF WEST TEXAS, KQRX-95X (
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOBLEY, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RADIO STATION MANAGER/ON-AIR PERSONALITY		Employer (See Instructions) RECORDING LIBRARY OF WEST TEXAS, KQRX-95X (

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2820/4629 Rpt: 2823/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCK, DAVID <hr/> 6 Contributor address; City; State; Zip Code SANDY, UT 84092	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) BOULDER MT LODGE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCK, FREIDA <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90402-1229	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) AMERICAN FILM FOUNDATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCK, SHIRLEY M <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38119-6907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCK, SHIRLEY M <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38119-6907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCZULSKI, ANDREW <hr/> Contributor address; City; State; Zip Code ERIE, PA 16506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OFFICE WORKER		Employer (See Instructions) SBS VALUATIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2821/4629 Rpt: 2824/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCZULSKI, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code NINE MILE FALLS, WA 99026	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCZYGEMBA, SHIRLEY <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOCZYGEMBA, SHIRLEY <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MODY, DEVESH <hr/> Contributor address; City; State; Zip Code FULSHEAR, TX 77441	Amount of Contribution (\$) \$5,222.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) VERSA INFRASTRUCTURE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOE, SIMON <hr/> Contributor address; City; State; Zip Code CORSICANA, TX 75110	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) MOE LAW OFFICES, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2822/4629 Rpt: 2825/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOELLER, JULIET <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628-1010	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) CAMBRIA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOELLERING, CHARLOTTE <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MENTOR		Employer (See Instructions) LEWISVILLE ISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOEN, DEBORAH <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MN 55008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOHL, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOHLE, TIMOTHY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2823/4629 Rpt: 2826/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOHLERE, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77388-3381	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SCIENTIFIC EDITOR		9 Employer (See Instructions) UTHEALTH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOHTADI, RACHELLE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOK, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATOR/ADMINISTRATOR		Employer (See Instructions) ASIAN AMERICAN CULTURAL CENTER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOK, CAROLYN <hr/> Contributor address; City; State; Zip Code MARTINEZ, CA 94553	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOK, CAROLYN <hr/> Contributor address; City; State; Zip Code MARTINEZ, CA 94553	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2824/4629 Rpt: 2827/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOK, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code MARTINEZ, CA 94553	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLDENHAUER, SHEILA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664-6843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLEY, PAULINE <hr/> Contributor address; City; State; Zip Code LENEXA, KS 66215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) UNIVERSITY OF CENTRAL MISSOURI
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA, ANA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) NYU LAW
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA, ANA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) NYU LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2825/4629 Rpt: 2828/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA, JESSICA	7 Amount of Contribution (\$) \$107.00
6 Contributor address; City; State; Zip Code MIAMI, FL 33157		
8 Principal occupation / Job title (See Instructions) PRODUCER		9 Employer (See Instructions) JESSICA MOLINA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA, JESUS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78410		
Principal occupation / Job title (See Instructions) SU COUNSELOR		Employer (See Instructions) STSARS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA, JESUS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78410		
Principal occupation / Job title (See Instructions) SU COUNSELOR		Employer (See Instructions) STSARS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA POER, LESLY	Amount of Contribution (\$) \$502.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLINA POER, LESLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2826/4629 Rpt: 2829/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLIS, REBECCA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-3434	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROGRAM MANAGER		9 Employer (See Instructions) DELL
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLIS, REBECCA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-3434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) DELL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLONY, DONALD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) UNIVERISTY OF TEXAS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLONY, DONALD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) UNIVERISTY OF TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLTZ, JOHN <hr/> Contributor address; City; State; Zip Code TACOMA, WA 98407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FREELANCE WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2827/4629 Rpt: 2830/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLTZ, JOHN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TACOMA, WA 98407		
8 Principal occupation / Job title (See Instructions) FREELANCE WRITER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLTZ, JOHN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TACOMA, WA 98407		
Principal occupation / Job title (See Instructions) FREELANCE WRITER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOLUBHOY, PERRY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75201		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ATLANTIC HOTELS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONACO, MADELINE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) LMI, LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONAHAN, LAURIE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code FREELAND, WA 98249		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2828/4629 Rpt: 2831/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONCAYO, LETICIA <hr/> 6 Contributor address; City; State; Zip Code CLINT, TX 79836	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONCEAUX, JULIAN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONCEAUX, JULIAN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONCRIEF, LOIS <hr/> Contributor address; City; State; Zip Code MAKAWAO, HI 96768	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONDER, STEVEN <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45215	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2829/4629 Rpt: 2832/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONDER, STEVEN <hr/> 6 Contributor address; City; State; Zip Code CINCINNATI, OH 45215	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONDER, STEVEN <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONDRAGON, CARLOS <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONDRAGON, CARLOS <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONDRAGON, CARLOS <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRUCK DRIVER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2830/4629 Rpt: 2833/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONFORD, ROSEANNE <hr/> 6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONGAN, MADDIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) TEXAS HEALTH RESOURCES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONGONIA, GLORIA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONGONIA, GLORIA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONJURE, NOEL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2831/4629 Rpt: 2834/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONJURE, NOEL <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONJURE, NOEL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONJURE, NOEL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONLEZUNR, AUDREY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$26.27
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONLEZUNR, AUDREY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$26.27
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2832/4629 Rpt: 2835/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONROE HANLEY, BEVERLY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code WILLIAMSBURG, VA 23185		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONSALVE, LINA	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) META
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONSON, GINA L	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DENISON, TX 75021		
Principal occupation / Job title (See Instructions) IT SUPPORT/PROJECT MANAGER		Employer (See Instructions) WEBBS ELECTRIC, HEATING & A/C
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONSON, GINA L	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DENISON, TX 75021		
Principal occupation / Job title (See Instructions) IT SUPPORT/PROJECT MANAGER		Employer (See Instructions) WEBBS ELECTRIC, HEATING & A/C
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTAGUE, MICHELLE	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code CIBOLO, TX 78108		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2833/4629 Rpt: 2836/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALVO, DIANE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) NEISD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALVO, DIANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEISD
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALVO, DIANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEISD
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTALVO, DIANE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTEITH, CAROLE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FARMINGDALE, ME 04344		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2834/4629 Rpt: 2837/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTEJO, BARBARA <hr/> 6 Contributor address; City; State; Zip Code NEWHALL, CA 91321	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTERO, PILAR <hr/> Contributor address; City; State; Zip Code SAUSALITO, CA 94965	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTERO, PILAR <hr/> Contributor address; City; State; Zip Code SAUSALITO, CA 94965	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTES, ANGELICA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EMT MEDIC		Employer (See Instructions) AUSTIN TRAVIS COUNTY EMS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTEZ FELDER, DEBRA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2835/4629 Rpt: 2838/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTEZ FELDER, DEBRA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTFORT, ANGELICA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) REGIONAL DIRECTOR		Employer (See Instructions) FIRSTSERVICE RESIDENTIAL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, CLAIRE <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97330	Amount of Contribution (\$) \$524.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, JAN <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MARY JANE <hr/> Contributor address; City; State; Zip Code NORTON SHORES, MI 49441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2836/4629 Rpt: 2839/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MARY JANE <hr/> 6 Contributor address; City; State; Zip Code NORTON SHORES, MI 49441	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MATTHEW <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATABASE ADMINISTRATOR		Employer (See Instructions) ORACLE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MATTHEW <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATABASE ADMINISTRATOR		Employer (See Instructions) ORACLE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MIMI <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LOAN OFFICER		Employer (See Instructions) GOLDSTAR MORTGAGE FINANCIAL
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MIMI <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LOAN OFFICER		Employer (See Instructions) GOLDSTAR MORTGAGE FINANCIAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2837/4629 Rpt: 2840/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, MIMI <hr/> 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LOAN OFFICER		9 Employer (See Instructions) GOLDSTAR MORTGAGE FINANCIAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, SARAH Y <hr/> Contributor address; City; State; Zip Code BRONX, NY 10463	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NYCPS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTGOMERY, WILL <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTICOLOMBI, MARGARET <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) HITRUST
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTICOLOMBI, MARGARET <hr/> Contributor address; City; State; Zip Code SAVANNAH, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) HITRUST

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2838/4629 Rpt: 2841/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTOYA, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code ALBANY, OR 97321	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTOYA, DANIEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) GILEAD SCIENCES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTOYA, DANIEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) GILEAD SCIENCES, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTOYA GERKE, PHYLLIS <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTS, JANE <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2839/4629 Rpt: 2842/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONTS, JANE <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOOD, CINDY <hr/> Contributor address; City; State; Zip Code PARIS, IL 61944	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOON, ELIZABETH <hr/> Contributor address; City; State; Zip Code FLORENCE, TX 76527	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOON, ELIZABETH <hr/> Contributor address; City; State; Zip Code FLORENCE, TX 76527	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOONAT, SAURABH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SAURABH MOONAT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2840/4629 Rpt: 2843/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOONEY, EDWARD	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code LAKE WYLIE, SC 29710-7067		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOONEY, MAUREEN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code CHICAGO, IL 60657		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOONEY, MEGAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOOR, KRISTEN	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXPEDIA GROUP
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, AARON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BINKLEY & BARFIELD, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2841/4629 Rpt: 2844/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, AARON	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) BINKLEY & BARFIELD, INC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ADRIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ALI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BUCHANAN, GA 30113		
Principal occupation / Job title (See Instructions) SEAMSTRESS		Employer (See Instructions) FAMILY UPHOLSTERY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, AMY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BASTROP, TX 78602		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2842/4629 Rpt: 2845/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, BETHANY <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ALLEN ISD
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, BETHANY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALLEN ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, CARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, CAROLEE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF THE INCARNATE WORD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, CAROLEE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UNIVERSITY OF THE INCARNATE WORD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2843/4629 Rpt: 2846/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, CHRIS <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions) KAISER
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, COLIN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PROVOST UMPHREY LAW FIRM
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, COLIN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PROVOST UMPHREY LAW FIRM
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, DAVID <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) POLICE OFFICER		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE POLICE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, DIANA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2844/4629 Rpt: 2847/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, DIANA <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, DIANA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, DIANE <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-6550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) NONE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, DIANE <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-6550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, EILEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228-5134	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GRAPHIC ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2845/4629 Rpt: 2848/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ERIN	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75218		
8 Principal occupation / Job title (See Instructions) EXECUTIVE ADMIN		9 Employer (See Instructions) DALLAS COUNTY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ERIN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75218		
Principal occupation / Job title (See Instructions) EXECUTIVE ADMIN		Employer (See Instructions) DALLAS COUNTY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ERIN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75218		
Principal occupation / Job title (See Instructions) EXECUTIVE ADMIN		Employer (See Instructions) DALLAS COUNTY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, GINA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FAIRVIEW, TX 75069		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, GINA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FAIRVIEW, TX 75069		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2846/4629 Rpt: 2849/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JACKIE <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78015	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JANE <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JANE <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JANET <hr/> Contributor address; City; State; Zip Code UPLAND, CA 91784	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JOE <hr/> Contributor address; City; State; Zip Code SULPHUR SPRINGS, TX 75482	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) AUDLEY MOORE CONSTRUCTION COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2847/4629 Rpt: 2850/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JOHN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code TUCSON, AZ 85750		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JOSEPH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) GAME MATHEMATICIAN		Employer (See Instructions) EVERI
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JOSEPH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) GAME MATHEMATICIAN		Employer (See Instructions) EVERI
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JULIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JULIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2848/4629 Rpt: 2851/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, KASSIE <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79424	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, LISA MIA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CLINICAL LAB SCIENTIST		Employer (See Instructions) CEDARS SINAI MEDICAL CENTER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, LUANN <hr/> Contributor address; City; State; Zip Code EVERETT, WA 98203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, MARCUS <hr/> Contributor address; City; State; Zip Code NORFOLK, VA 23505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2849/4629 Rpt: 2852/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75244	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, RICHARD <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, RICHARD <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, ROBERT <hr/> Contributor address; City; State; Zip Code DERRY, NH 03038	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, SANDRA G <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LPC		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2850/4629 Rpt: 2853/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, SANDRA G <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) LPC		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, SAVANT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SAVANT MOORE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, SAVANT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SAVANT MOORE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, VERONICA <hr/> Contributor address; City; State; Zip Code KAPAAU, HI 96755	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SEAMSTRESS		Employer (See Instructions) SELF EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, VICKI <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2851/4629 Rpt: 2854/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, VICKI <hr/> 6 Contributor address; City; State; Zip Code HALTOM CITY, TX 76137	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, VICKI <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, WILLIAM <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98225	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOOS, SUSAN <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34113	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, ANA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2852/4629 Rpt: 2855/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, ANA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75024	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, DANIEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614-4548	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) LAW PROF		Employer (See Instructions) DEPAUL UNIVERSITY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, EDDIE <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LANGLEY & BANACK INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, ELENA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79903	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEATEACHER		Employer (See Instructions) CLINT ISD
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, LINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) GCAFLCIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2853/4629 Rpt: 2856/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, LISA <hr/> 6 Contributor address; City; State; Zip Code NOLANVILLE, TX 76559	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) THERAPIST		9 Employer (See Instructions) LONE STAR CIRCLE OF CARE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, MICHELLE <hr/> Contributor address; City; State; Zip Code GLENDALE, CA 91203	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCHOOL PSYCHOLOGIST		Employer (See Instructions) SAN GABRIEL UNIFIED SCHOOL DISTRICT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, MONICA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, SHARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EBBY HALLIDAY REALTORS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORALES, SHARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) EBBY HALLIDAY REALTORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2854/4629 Rpt: 2857/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, CECIL <hr/> 6 Contributor address; City; State; Zip Code NRHILLS, TX 76180	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		9 Employer (See Instructions) NESTLE WATERS
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, CECIL <hr/> Contributor address; City; State; Zip Code NRHILLS, TX 76180	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) NESTLE WATERS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, CHRISTIE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, CHRISTIE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, KIM <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2855/4629 Rpt: 2858/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, KIM <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, MICHAEL <hr/> Contributor address; City; State; Zip Code PONTE VEDRA BEACH, FL 32082	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, MIKE <hr/> Contributor address; City; State; Zip Code PONTE VEDRA BEACH, FL 32082	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, PAUL <hr/> Contributor address; City; State; Zip Code ROSLINDALE, MA 02131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, REINE <hr/> Contributor address; City; State; Zip Code MORRIS PLAINS, NJ 07950	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KINDRED HOSP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2856/4629 Rpt: 2859/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, REINE <hr/> 6 Contributor address; City; State; Zip Code MORRIS PLAINS, NJ 07950	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) KINDRED HOSP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, REINE <hr/> Contributor address; City; State; Zip Code MORRIS PLAINS, NJ 07950	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KINDRED HOSP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAN, REINE <hr/> Contributor address; City; State; Zip Code MORRIS PLAINS, NJ 07950	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KINDRED HOSP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOREL, ROSANNE <hr/> Contributor address; City; State; Zip Code LUDLOW, MA 01056-1856	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORELAND, JEFFREY P <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) STORE CLERK		Employer (See Instructions) THE DOMES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2857/4629 Rpt: 2860/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORELAND, JEFFREY P	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code MILWAUKEE, WI 53219		
8 Principal occupation / Job title (See Instructions) STORE CLERK		9 Employer (See Instructions) THE DOMES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, DAVID	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248		
Principal occupation / Job title (See Instructions) STORE MANAGER		Employer (See Instructions) PETLAND
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, EV	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AVONDALE, AZ 85323		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, GLENDA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, GLENDA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2858/4629 Rpt: 2861/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, GLENDA <hr/> 6 Contributor address; City; State; Zip Code SEGUIN, TX 78155	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, JESUS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LEGISLATIVE STAFF		Employer (See Instructions) HOUSE OF REPRESENTATIVES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, OSCAR <hr/> Contributor address; City; State; Zip Code WATSONVILLE, CA 95076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, OSCAR <hr/> Contributor address; City; State; Zip Code WATSONVILLE, CA 95076	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, ROBIN <hr/> Contributor address; City; State; Zip Code SAN RAMON, CA 94583	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2859/4629 Rpt: 2862/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, ROBIN <hr/> 6 Contributor address; City; State; Zip Code SAN RAMON, CA 94583	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORENO, SERENA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOREY, ROY <hr/> Contributor address; City; State; Zip Code FORT DAVIS, TX 79734	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, ANN <hr/> Contributor address; City; State; Zip Code KEMAH, TX 77565-2123	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, CATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2860/4629 Rpt: 2863/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, CLAIRE <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97229	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, DONNA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, DONNA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, DONNA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78725	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		Employer (See Instructions) UT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2861/4629 Rpt: 2864/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, GEORGIA <hr/> 6 Contributor address; City; State; Zip Code BRATTLEBORO, VT 05301	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, GEORGIA <hr/> Contributor address; City; State; Zip Code BRATTLEBORO, VT 05301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, GLORIA <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MICROBIOLOGIST		Employer (See Instructions) TENET HEALTHCARE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, JANICE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, JOLYNNE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2862/4629 Rpt: 2865/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, JOLYNNE <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, KAREN <hr/> Contributor address; City; State; Zip Code AUGUSTA, MI 49012	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, KRISTY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, MONTIE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706-6230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2863/4629 Rpt: 2866/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77064	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064-4273	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2864/4629 Rpt: 2867/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, PAUL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77064-4273	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, SARAH <hr/> Contributor address; City; State; Zip Code HASTINGSONHUDSON, NY 10706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SARAH MORGAN
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, SARAH <hr/> Contributor address; City; State; Zip Code HASTINGSONHUDSON, NY 10706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SARAH MORGAN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGANTI-FISHER, TERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749-2719	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORIEARTY, TAMMY <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79423	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PUBLIC HEALTH		Employer (See Instructions) DSHS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2865/4629 Rpt: 2868/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORIMOTO, COLLEEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) HIGHER EDUCATION ADMINISTRATOR		9 Employer (See Instructions) RICE UNIVERSITY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORLIER, ETHELYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORLIER, ETHELYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORLIER, MARGARET <hr/> Contributor address; City; State; Zip Code CANTON, GA 30114	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ASSOC. DEAN		Employer (See Instructions) REINHARDT UNIVERSITY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORMAN, JEANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2866/4629 Rpt: 2869/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORMAN, JEANNE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOROZOVS, ALEKSANDRS <hr/> Contributor address; City; State; Zip Code BOCA RATON, FL 33486	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) FEA
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORPHEW, SALENA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SALENA MORPHEW
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORPHEW, SALENA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SALENA MORPHEW
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, ANDREW <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WORLD RELIEF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2867/4629 Rpt: 2870/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, ANDREW <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76123	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) WORLD RELIEF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, ANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, ANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, BRENDA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, CATHERINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2868/4629 Rpt: 2871/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, CHERISH <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) HOSPITAL
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, CHERISH <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) HOSPITAL
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2869/4629 Rpt: 2872/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, GWENDOLYN <hr/> 6 Contributor address; City; State; Zip Code HIGHTSTOWN, NJ 08520	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JOE <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JOE <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JOE <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JOE <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2870/4629 Rpt: 2873/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JUDITH <hr/> 6 Contributor address; City; State; Zip Code HENDERSON, NV 89011	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JUDITH <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, JUDITH <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LALLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CENTERPOINT ENERGY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA <hr/> Contributor address; City; State; Zip Code TACOMA, WA 98403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2871/4629 Rpt: 2874/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code TACOMA, WA 98403		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code TACOMA, WA 98403		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code TACOMA, WA 98403		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code TACOMA, WA 98403		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TACOMA, WA 98403		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2872/4629 Rpt: 2875/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA <hr/> 6 Contributor address; City; State; Zip Code TACOMA, WA 98403	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LAURA <hr/> Contributor address; City; State; Zip Code TACOMA, WA 98403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LELA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LELA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LJ <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) INTEX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2873/4629 Rpt: 2876/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LYNNE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, MARCELLA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) DYSLEXIA THERAPIST		Employer (See Instructions) DYSLEXIA ON DEMAND
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, MARCELLA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) DYSLEXIA THERAPIST		Employer (See Instructions) DYSLEXIA ON DEMAND
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, MARCELLA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ROCKWALL, TX 75087		
Principal occupation / Job title (See Instructions) DYSLEXIA THERAPIST		Employer (See Instructions) DYSLEXIA ON DEMAND
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, MARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11215		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2874/4629 Rpt: 2877/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, MARY <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11215	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, MILTON <hr/> Contributor address; City; State; Zip Code COLUMBIA, SC 29223	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NOT SAYING
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, PAGE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, SUMATI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LPC-S		Employer (See Instructions) SUMATI MORRIS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS-MAZZETTI, MERRIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) AUSTIN WIND RIVER MANAGEMENT, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2875/4629 Rpt: 2878/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISEY, JERRY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LABORATORY DIRECTOR		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, ANN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, ANN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, CONSTANCE <hr/> Contributor address; City; State; Zip Code OVIEDO, FL 32765	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, GERHARDT <hr/> Contributor address; City; State; Zip Code HAILEY, ID 83333	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2876/4629 Rpt: 2879/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARK <hr/> 6 Contributor address; City; State; Zip Code BULVERDE, TX 78163	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARK <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SOCIALWORKER
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARK <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARK <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARK <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SOCIALWORKER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2877/4629 Rpt: 2880/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARK	7 Amount of Contribution (\$) \$130.00
6 Contributor address; City; State; Zip Code BULVERDE, TX 78163		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARY LOUISE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PIEDMONT, CA 94611		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, MARY LOUISE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PIEDMONT, CA 94611		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, STEPHEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MCALLEN, TX 78504		
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) SOUTH TEXAS COLLEGE
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON, WESLEY	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-8376		
Principal occupation / Job title (See Instructions) COMMUNITY FACILITATOR		Employer (See Instructions) CAREGIVER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2878/4629 Rpt: 2881/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON-HALL, GAIL <hr/> 6 Contributor address; City; State; Zip Code WYNCOTE, PA 19095	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON-HALL, GAIL <hr/> Contributor address; City; State; Zip Code WYNCOTE, PA 19095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON-HALL, GAIL <hr/> Contributor address; City; State; Zip Code WYNCOTE, PA 19095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISON-HALL, GAIL <hr/> Contributor address; City; State; Zip Code WYNCOTE, PA 19095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRISSON, LENORE <hr/> Contributor address; City; State; Zip Code GEARHART, OR 97138	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2879/4629 Rpt: 2882/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORROW, LAURA <hr/> 6 Contributor address; City; State; Zip Code AUBREY, TX 76227-5325	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORROW, TERESA <hr/> Contributor address; City; State; Zip Code MACON, GA 31220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOCATIONAL REHABILITATION COUNSELOR		Employer (See Instructions) ANTHEM/ELEVANCE HEALTH
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORROW, TERESA <hr/> Contributor address; City; State; Zip Code MACON, GA 31220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOCATIONAL REHABILITATION COUNSELOR		Employer (See Instructions) ANTHEM/ELEVANCE HEALTH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORSE, FREDERICK <hr/> Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) MAI
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTENSEN, ERIN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-1616	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2880/4629 Rpt: 2883/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTENSEN, ERIN <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-1616	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, B COLE <hr/> Contributor address; City; State; Zip Code SOUTH WELLFLEET, MA 02663	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, B COLE <hr/> Contributor address; City; State; Zip Code SOUTH WELLFLEET, MA 02663	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2881/4629 Rpt: 2884/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77018	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORTON, TIMOTHY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2882/4629 Rpt: 2885/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSBERGER, NING <hr/> 6 Contributor address; City; State; Zip Code BOULDER, CO 80305	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) IMAGESBYNING
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSCHNER, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSCHNER, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSCHNER, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSELEY, RICK <hr/> Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2883/4629 Rpt: 2886/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSER, CAROL <hr/> 6 Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSER, CAROL <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSER, MEGAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) UT DALLAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSES, SUSAN <hr/> Contributor address; City; State; Zip Code LONGVIEW, TX 75604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSHIRNIA, KATHLEEN <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95219	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2884/4629 Rpt: 2887/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSHIRNIA, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code STOCKTON, CA 95219	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSHIRNIA, KATHY <hr/> Contributor address; City; State; Zip Code STOCKTON, CA 95219	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSIMANN, ELEANOR <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSIMANN, ELEANOR <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSKOP, KERRY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2885/4629 Rpt: 2888/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSLEY, HOWELL <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSLEY, HOWELL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSLEY, HOWELL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSLEY, HOWELL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSLEY, LLOYD <hr/> Contributor address; City; State; Zip Code HITCHCOCK, TX 77563	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) CHR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2886/4629 Rpt: 2889/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, ANITA <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, ANITA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, BONNIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$2,544.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) MBCO ENGINEERING, LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, CHRISTENE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$97.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, CHRISTENE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$97.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2887/4629 Rpt: 2890/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSS, JAMES <hr/> 6 Contributor address; City; State; Zip Code LEE, NH 03861	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CASHIER		9 Employer (See Instructions) MARKET BASKET
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSSMAN, NANCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) PRESBYTIERAN CHILDREN'S HOMES AND SERVICES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSSMAN, NANCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) PRESBYTIERAN CHILDREN'S HOMES AND SERVICES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSSMAN, NANCY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) PRESBYTIERAN CHILDREN'S HOMES AND SERVICES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOST, JORDAN <hr/> Contributor address; City; State; Zip Code SCOTCH PLAINS, NJ 07076	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BRYAN CAVE LEIGHTON PAISNER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2888/4629 Rpt: 2891/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSTY, HILARY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) VAMC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSTYN, AMBER	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MOSTYN LAW FIRM
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOTARD, MARK	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, KARYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LOWELL, MI 49331		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, KARYN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LOWELL, MI 49331		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2889/4629 Rpt: 2892/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, KATHERINE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code BALTIMORE, MD 21211		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) JHU
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, SHARON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LEEDS, MA 01053		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOULTON, SHARON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LEEDS, MA 01053		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUNTFORD, GWALTNEY	Amount of Contribution (\$) \$50.25
Contributor address; City; State; Zip Code CONCORD, CA 94518		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUNTJOY, NATALIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BOWLING GREEN, KY 42103		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WKU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2890/4629 Rpt: 2893/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOURITSEN, ELIZABETH P <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209-1827	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOURRAY, CHER <hr/> Contributor address; City; State; Zip Code CLARKSTON, MI 48346	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) STYLIST		Employer (See Instructions) LAMARQUISE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOURTAJA, ANNE <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUTON, ROBIN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOUTON, ROBIN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2891/4629 Rpt: 2894/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOYA, LORI <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOYER DEFELICE, REBECCA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) EMERGE TX
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOYERS, ROBERT <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) RFD & ASSOCIATES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOYERS, ROBERT <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) RFD & ASSOCIATES
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOYERS, ROBERT <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) RFD & ASSOCIATES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2892/4629 Rpt: 2895/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOYNIHAN, THOMAS	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code ROWLETT, TX 75088		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) DE NOVO LEGAL LLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOZISEK, ALANNAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WHARTON, TX 77488		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOZISEK, ALANNAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WHARTON, TX 77488		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOZLEY, FARISH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) SENIOR GOVERNMENT AFFAIRS ASSOCIATE		Employer (See Instructions) EDP RENEWABLES
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOZLEY, FARISH	Amount of Contribution (\$) \$29.00
Contributor address; City; State; Zip Code HOUSTON, TX 77009		
Principal occupation / Job title (See Instructions) SENIOR GOVERNMENT AFFAIRS ASSOCIATE		Employer (See Instructions) EDP RENEWABLES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2893/4629 Rpt: 2896/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOZON, NADINE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ARTIST /EDUCATOR		9 Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MPH, H. LEABAH WINTER <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MPH, H. LEABAH WINTER <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MPH, H. LEABAH WINTER <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MRVOS, RICHARD <hr/> Contributor address; City; State; Zip Code COLLINSVILLE, IL 62234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2894/4629 Rpt: 2897/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MRVOS, RICHARD	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code COLLINSVILLE, IL 62234		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MRVOS, RICHARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLLINSVILLE, IL 62234		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MU, SHUYUN	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code APEX, NC 27502		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SELF EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUCKEROY, EMMETT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) CONSILTANT		Employer (See Instructions) PEGASYSTEMS INC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUCKEROY, EMMETT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) CONSILTANT		Employer (See Instructions) PEGASYSTEMS INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2895/4629 Rpt: 2898/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUDD, MARYJANE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77077	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) EXEC DIRECTOR		9 Employer (See Instructions) EHCMA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUDROVICH, ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUDROVICH, ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUDROVICH, ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUDROVICH, ELLEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2896/4629 Rpt: 2899/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUDROVICH, ELLEN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76116	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUELLER, HENRY <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20007	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) HANDCRAFTED DEV., LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUHL, LINDA <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUHL, LINDA <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUHL, SHELBY <hr/> Contributor address; City; State; Zip Code PRAIRIE HILL, TX 76678	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2897/4629 Rpt: 2900/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUHL, SHELBY <hr/> 6 Contributor address; City; State; Zip Code PRAIRIE HILL, TX 76678	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUISE, KAREN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 01960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUISE, KAREN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 01960	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUISE, KAREN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUKERJI, SHAMPA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MUKERJI LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2898/4629 Rpt: 2901/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULCAHY-LIBEL, KELLY <hr/> 6 Contributor address; City; State; Zip Code DES PLAINES, IL 60018	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULCAHY-LIBEL, KELLY <hr/> Contributor address; City; State; Zip Code DES PLAINES, IL 60018	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULCAHY-LIBEL, KELLY <hr/> Contributor address; City; State; Zip Code DES PLAINES, IL 60018	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULDER, NANCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75207	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) DALLAS COUNTY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULDROW, LORETTA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2899/4629 Rpt: 2902/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULDROW, LORETTA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULFORD, ELIZABETH <hr/> Contributor address; City; State; Zip Code CUPERTINO, CA 95014	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHEARN, PAULA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHEARN, PAULA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHOLLAND, ERIN <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MONTGOMERY ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2900/4629 Rpt: 2903/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHOLLAND, ERIN <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) MONTGOMERY ISD
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHOLLAND, ERIN <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MONTGOMERY ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHOLLAND, JANE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULHOLLAND, JANE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLEN, ANN <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2901/4629 Rpt: 2904/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLER, JUDITH	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLER, PAUL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLETT, JOY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77080		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) JOY MULLETT
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLIGAN, ANNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLIGAN, ANNE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2902/4629 Rpt: 2905/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINAX, JOAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		9 Employer (See Instructions) EDDINS COUNSELING GROUP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINAX, JOAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		Employer (See Instructions) EDDINS COUNSELING GROUP
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINAX, JOAN E <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008-2646	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		Employer (See Instructions) EDDINS COUNSELING GROUP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINS, ERIKA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) YOGA INSTRUCTOR		Employer (See Instructions) BLACK SWAN YOGA
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULLINS, MELISSA <hr/> Contributor address; City; State; Zip Code LORENA, TX 76655	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) BAYLOR		Employer (See Instructions) EDUCATOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2903/4629 Rpt: 2906/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULROY, LINDA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULROY, LINDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULROY, LINDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MULROY, LINDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUMA, LAURA <hr/> Contributor address; City; State; Zip Code PHOENIX, AZ 85016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) VIDA FIRM, LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2904/4629 Rpt: 2907/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUMA, LAURA	7 Amount of Contribution (\$) \$42.00
6 Contributor address; City; State; Zip Code PHOENIX, AZ 85016		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) VIDA FIRM, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUMMA, CHRIS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNA, NELSON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDER, GUY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CANYON LAKE, TX 78133		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDORFF, JAN AND EILEEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RICHMOND, TX 77469		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2905/4629 Rpt: 2908/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDORFF, JAN AND EILEEN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code RICHMOND, TX 77469		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDWILLER, LINDA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDY, DOROTHY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) BIOCHEMIST		Employer (See Instructions) UTSW
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNDY, DOROTHY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) BIOCHEMIST		Employer (See Instructions) UTSW
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNGIGUERRA, PETER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DENTON, TX 76205		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2906/4629 Rpt: 2909/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNN, DENISE <hr/> 6 Contributor address; City; State; Zip Code ARVADA, CO 80007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PRINT PRODUCTION MANAGER		9 Employer (See Instructions) UNIVERSITY OF COLORADO BOULDER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNNS, JOSEPH <hr/> Contributor address; City; State; Zip Code WEST DEPTFORD, NJ 08066	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMING		Employer (See Instructions) WILLIS TOWERS WATSON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNNS, JOSEPH <hr/> Contributor address; City; State; Zip Code WEST DEPTFORD, NJ 08066	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMING		Employer (See Instructions) WILLIS TOWERS WATSON
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, ALFREDO <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, ALFREDO <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2907/4629 Rpt: 2910/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, ERNEST <hr/> 6 Contributor address; City; State; Zip Code GLENDALE, AZ 85304	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CIVIL ENGINEERING DESIGNER		9 Employer (See Instructions) KAEKO INC
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNOZ, GRACE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) GRACIE MUNOZ
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNRO, ALEXANDER <hr/> Contributor address; City; State; Zip Code HONOLULU, HI 96816	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACADEMIC SPECIALIST		Employer (See Instructions) UNIVERSITY OF HAWAII AT MANOA
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNRO, FAWN <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNRO, FAWN <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2908/4629 Rpt: 2911/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNRO, ROBERT	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code ANGLETON, TX 77515		
8 Principal occupation / Job title (See Instructions) NONE		9 Employer (See Instructions) NONE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNRO, ROBERT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ANGLETON, TX 77515		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNROE, GEORGE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNROE, GEORGE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNROE, MICHAEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALACHUA, FL 32615		
Principal occupation / Job title (See Instructions) GRADUATE STUDENT - SCIENCE COMMUNICATION		Employer (See Instructions) UNIVERSITY OF FLORIDA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2909/4629 Rpt: 2912/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNROE, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code ALACHUA, FL 32615	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) GRADUATE STUDENT - SCIENCE COMMUNICATION		9 Employer (See Instructions) UNIVERSITY OF FLORIDA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNSON, APRIL <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-8890	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) UT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURACA, JOHN <hr/> Contributor address; City; State; Zip Code POLAND, NY 13431-1708	Amount of Contribution (\$) \$16.66
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURAKAMI, CHRIS <hr/> Contributor address; City; State; Zip Code TORRANCE, CA 90505	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCK, AMY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2910/4629 Rpt: 2913/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCK, GAIL	7 Amount of Contribution (\$) \$20.24
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20017		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCK, GAIL	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code WASHINGTON, DC 20017		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCK, GAIL	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code WASHINGTON, DC 20017		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCK, GAIL	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20017		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DCPS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCK, GAIL	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code WASHINGTON, DC 20017		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2911/4629 Rpt: 2914/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURILLO, LUZ <hr/> 6 Contributor address; City; State; Zip Code KINGSBURY, TX 78638	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURILLO, LUZ <hr/> Contributor address; City; State; Zip Code KINGSBURY, TX 78638	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHEY, GARY <hr/> Contributor address; City; State; Zip Code RUNAWAY BAY, TX 76436	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHEY, GARY <hr/> Contributor address; City; State; Zip Code RUNAWAY BAY, TX 76436	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, BRIAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) EDGE REALTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2912/4629 Rpt: 2915/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, CAROL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, CYNTHIA <hr/> Contributor address; City; State; Zip Code BUFFALO, NY 14223-2306	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) ERIE COUNTY HEALTH DEPARTMENT
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, DENNIS <hr/> Contributor address; City; State; Zip Code RENO, NV 89511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL CONSULTANT		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, GLADYS <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, JEROME <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2913/4629 Rpt: 2916/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77070	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) CYPRESS FAIRBANKS ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, LEAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) HOSPITAL
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, LELAND <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT COMPLEX COORDINATOR		Employer (See Instructions) UT AUSTIN
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, MARK <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, MARK <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2914/4629 Rpt: 2917/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, MARTHA	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77056		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, MARY JO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MONTGOMERY, TX 77356		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, MARYLOU	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN RAFAEL, CA 94901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, NED	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MT PLEASANT, WI 53403-9711		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, NED	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MT PLEASANT, WI 53403-9711		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2915/4629 Rpt: 2918/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, PAT <hr/> 6 Contributor address; City; State; Zip Code MARION, IA 52302	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, PAT <hr/> Contributor address; City; State; Zip Code MARION, IA 52302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, THOMAS <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20903	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, WILLIAM <hr/> Contributor address; City; State; Zip Code ALBANY, CA 94706	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURR, PATTI <hr/> Contributor address; City; State; Zip Code HIDEAWAY, TX 75771	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2916/4629 Rpt: 2919/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURR, PATTI	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HIDEAWAY, TX 75771		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, ARNETTA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROSHARON, TX 77583		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HISD
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, CHEYENNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROWLETT, TX 75089		
Principal occupation / Job title (See Instructions) HIGHER EDUCATION PROFESSIONAL		Employer (See Instructions) SOUTHERN METHODIST UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, CLARE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) REHAB ASST		Employer (See Instructions) TWC
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, CLARE	Amount of Contribution (\$) \$12.01
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) REHAB ASST		Employer (See Instructions) TWC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2917/4629 Rpt: 2920/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, DANIEL	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code YONKERS, NY 10701		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, DOUGLAS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SANTA CRUZ, CA 95061		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, FREDERIC	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ATASCADERO, CA 93422		
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, JULIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, KATHLEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CLARKSVILLE, TN 37043		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CMCSS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2918/4629 Rpt: 2921/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, LOIS <hr/> 6 Contributor address; City; State; Zip Code NEW HAVEN, CT 06513	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, NORA <hr/> Contributor address; City; State; Zip Code WEST COLUMBIA, SC 29169	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, SUS <hr/> Contributor address; City; State; Zip Code POOLVILLE, TX 76487-5735	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2919/4629 Rpt: 2922/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, SUSAN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code POOLVILLE, TX 76487-5735		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, TIMOTHY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DECATUR, IL 62526		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DECATUR, IL 62526		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DECATUR, IL 62526		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY FIMBEL, MARIANNE	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code LAMBERTVILLE, NJ 08530		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2920/4629 Rpt: 2923/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY FIMBEL, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code LAMBERTVILLE, NJ 08530	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY FIMBEL, MARIANNE <hr/> Contributor address; City; State; Zip Code LAMBERTVILLE, NJ 08530	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRY, RONALD <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSCLE, SANDRA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSCOTT, AMY JO <hr/> Contributor address; City; State; Zip Code AMHERST, NH 03031	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADVOCATE		Employer (See Instructions) CRISIS CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2921/4629 Rpt: 2924/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSCOTT, AMY JO <hr/> 6 Contributor address; City; State; Zip Code AMHERST, NH 03031	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ADVOCATE		9 Employer (See Instructions) BRIDGES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSE, WALTER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF TEXAS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSGRAVE, BELINDA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSGROVE, MAHLIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN		Employer (See Instructions) NXP SEMICONDUCTORS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSGROVE, MAHLIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN		Employer (See Instructions) NXP SEMICONDUCTORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2922/4629 Rpt: 2925/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSHINSKI, JOHN <hr/> 6 Contributor address; City; State; Zip Code MURRIETA, CA 92562	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSHINSKI, JOHN <hr/> Contributor address; City; State; Zip Code MURRIETA, CA 92562	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSHINSKI, JOHN <hr/> Contributor address; City; State; Zip Code MURRIETA, CA 92562	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSELMAN, KARL-THOMAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		Employer (See Instructions) WILLIAMSON COUNTY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSELMAN, KARL-THOMAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		Employer (See Instructions) WILLIAMSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2923/4629 Rpt: 2926/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSELMAN, KARL-THOMAS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		9 Employer (See Instructions) WILLIAMSON COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSELMAN, KT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		Employer (See Instructions) WILLIAMSON COUNTY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSELMAN, KT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$7.44
Principal occupation / Job title (See Instructions) JUSTICE OF THE PEACE		Employer (See Instructions) WILLIAMSON COUNTY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSO, CHERYL <hr/> Contributor address; City; State; Zip Code DECATUR, TX 76234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) BAYLOR SURGICARE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUSSO, CHERYL <hr/> Contributor address; City; State; Zip Code DECATUR, TX 76234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) BAYLOR SURGICARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2924/4629 Rpt: 2927/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYER, TANSY <hr/> 6 Contributor address; City; State; Zip Code VENICE, CA 90291	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ART DIRECTOR		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, AMY <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35235	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, AMY <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35235	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, CATHERINE <hr/> Contributor address; City; State; Zip Code LINWOOD, NJ 08221	Amount of Contribution (\$) \$10.12
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF PENNSYLVANIA
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, COURTNEY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380-0926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2925/4629 Rpt: 2928/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, COURTNEY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SPRING, TX 77380-0926		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, COURTNEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPRING, TX 77380		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, COURTNEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPRING, TX 77380		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, DAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, KAREN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76116-8156		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2926/4629 Rpt: 2929/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, LAURA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ALVIN, TX 77511		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, LAURA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALVIN, TX 77511		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, MARTHA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, STEVEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, STEVEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2927/4629 Rpt: 2930/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code TOMBALL, TX 77377	7 Amount of Contribution (\$) \$42.13
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED BUSINESS OWNER		9 Employer (See Instructions) AQUARIUM SYSTEMS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYLES, RAYMOND <hr/> Contributor address; City; State; Zip Code SAINT JOHN, IN 46373	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYLES, YVONNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYTHEO, FELICIEN <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DRIVER		Employer (See Instructions) UBER
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) N/A, BIG AND BRIGHT PAC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78761	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2928/4629 Rpt: 2931/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NACHMAN, MARK <hr/> 6 Contributor address; City; State; Zip Code BRODHEADSVILLE, PA 18322	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NACKLEY, DANIEL <hr/> Contributor address; City; State; Zip Code HOLLIDAYSBURG, PA 16648	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DEPARTMENT OF VETERANS AFFAIRS VET-HOME
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NADEAU, BART <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94131-3238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NADEAU, BART <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94131-3238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NADEAU, CHRISTINE <hr/> Contributor address; City; State; Zip Code HERCULES, CA 94547	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2929/4629 Rpt: 2932/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NADEAU, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code HERCULES, CA 94547	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NADEAU, CHRISTINE <hr/> Contributor address; City; State; Zip Code HERCULES, CA 94547	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAGLE, STEPHEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAGLE, STEPHEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAGY, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2930/4629 Rpt: 2933/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAGY, REBECCA <hr/> 6 Contributor address; City; State; Zip Code MILTON, FL 32583	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAIR, GOPALAN <hr/> Contributor address; City; State; Zip Code BANGALORE, DC 20000	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAISHTAT, ELLIOTT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAJERA, LUCILLA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) EL PASO COUNTY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAJERA, LUCILLA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) EL PASO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2931/4629 Rpt: 2934/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAKAMURA, SANDRA <hr/> 6 Contributor address; City; State; Zip Code TAKOMA PARK, MD 20912	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAKASHIMA, ANNA <hr/> Contributor address; City; State; Zip Code DELAVAN, WI 53115	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAKAWATASE, ED <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119-3264	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAKAWATASE, NORRIE <hr/> Contributor address; City; State; Zip Code AUBREY, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAKAWATASE, NORRIE <hr/> Contributor address; City; State; Zip Code AUBREY, TX 76227	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2932/4629 Rpt: 2935/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NALL, MICHELLE AND RYAN	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code GAINESVILLE, FL 32601		
8 Principal occupation / Job title (See Instructions) ARNP		9 Employer (See Instructions) UF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NANCE, CHRISTIAN R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) MATERIALS PLANNER		Employer (See Instructions) PACCAR
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NANCE, CHRISTIAN R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) MATERIALS PLANNER		Employer (See Instructions) PACCAR
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NANCE, CHRISTIAN R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76209		
Principal occupation / Job title (See Instructions) MATERIALS PLANNER		Employer (See Instructions) PACCAR
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NANTIER, TERRY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10022		
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) PAPERCUTZ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2933/4629 Rpt: 2936/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAPIER, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76114	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAPOLETANO, LINDA <hr/> Contributor address; City; State; Zip Code EAST HAMPTON, CT 06424	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAQUIN, RANDELL <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA/INVESTMENT PLANNER		Employer (See Instructions) RANDELL M. NAQUIN, CPA, PLLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARANJO, IVAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CITY PLANNER		Employer (See Instructions) CITY OF AUSTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARANJO, ORLINDA <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2934/4629 Rpt: 2937/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARAYAN, RANDHIR <hr/> 6 Contributor address; City; State; Zip Code MOORPARK, CA 93021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARAYANAPPA, HARISH <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EPIC TRANSPORTATION GROUP, LP
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAREY, JAY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARON, CHRYSTA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ACADEMIC DESIGNER		Employer (See Instructions) MCGRAW HILL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARSI, SIRAJ <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77498	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CRE FINANCE		Employer (See Instructions) INTEGRATED BUSINESS FINANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2935/4629 Rpt: 2938/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NARVAEZ, PRISCILLA <hr/> 6 Contributor address; City; State; Zip Code TULSA, OK 74112	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) TULSA PUBLIC SCHOOLS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASEEM, HARIS <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, ANDREW <hr/> Contributor address; City; State; Zip Code MYRTLE BEACH, SC 29575	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FUNDRAISER		Employer (See Instructions) CHILDRENS MIRACLE NETWORK
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, CARMEN <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SWITCHBOARD OPERATOR		Employer (See Instructions) BMI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, CAROLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2936/4629 Rpt: 2939/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, JO <hr/> 6 Contributor address; City; State; Zip Code MOBERLY, MO 65270-4579	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, RICHARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC SPEAKING PITCH COACH		Employer (See Instructions) SELF-EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, SIMONE <hr/> Contributor address; City; State; Zip Code DETROIT, MI 48202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASH, SIMONE <hr/> Contributor address; City; State; Zip Code DETROIT, MI 48202	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASRULLAH, MOHAMMED <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2937/4629 Rpt: 2940/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASRULLAH, MOHAMMED <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASSEN, KENT <hr/> Contributor address; City; State; Zip Code PINCKNEY, MI 48169	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASSEN, KENT <hr/> Contributor address; City; State; Zip Code PINCKNEY, MI 48169	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASSER, FATIMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) BEYONDMEAT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NASSER, SHAFFY <hr/> Contributor address; City; State; Zip Code PALMDALE, CA 93551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE DEVELOPER		Employer (See Instructions) ICON PROPERTIES INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2938/4629 Rpt: 2941/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATALE, MASON <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SPECIAL PROJECTS MANAGER		9 Employer (See Instructions) HARRIS COUNTY OF TEXAS COMMISSIONER PRECINCT 4
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATARAJAN, RUFU <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVENTS DIRECTOR		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATARAJAN, RUFU <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVENTS DIRECTOR		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATARAJAN, RUFU <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) EVENTS DIRECTOR		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATARAJAN, RUFU <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVENTS DIRECTOR		Employer (See Instructions) HARRIS COUNTY PRECINCT 4

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2939/4629 Rpt: 2942/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATARAJAN, RUFU <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EVENTS DIRECTOR		9 Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATARAJAN, RUFU <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EVENTS DIRECTOR		Employer (See Instructions) HARRIS COUNTY PRECINCT 4
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATH, AUDREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATH, AUDREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATH, AUDREY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2940/4629 Rpt: 2943/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATHAN, RICHARD <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATHAN, RICHARD <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATHAN, SUSAN <hr/> Contributor address; City; State; Zip Code DENNISPORT, MA 02639	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) ADVOCATES
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NATSHEH, HATEM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAUGHTIN, PATRICK <hr/> Contributor address; City; State; Zip Code KEWANEE, IL 61443	Amount of Contribution (\$) \$16.09
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2941/4629 Rpt: 2944/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAUGHTIN, PATRICK <hr/> 6 Contributor address; City; State; Zip Code KEWANEE, IL 61443	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAULSMAS, SANDRA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED POLICE OFFICER		Employer (See Instructions) RETIRED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAULSMAS, SANDRA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED POLICE OFFICER		Employer (See Instructions) RETIRED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAULSMAS, SANDRA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED POLICE OFFICER		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAVA, MARIA <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2942/4629 Rpt: 2945/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAVARRO, ANA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETAIL		9 Employer (See Instructions) LVMH
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAVARRO, BARBARA <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) HARRIS COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAVARRO, LUIS <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OPTOMETRIST		Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAVARRO, MARITA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218-3526	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NAVARRO, SUSANA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2943/4629 Rpt: 2946/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, SAVINIA <hr/> 6 Contributor address; City; State; Zip Code STAMFORD, CT 06901	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, YOURHIGHNESS <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NEAL LEGAL, P.C.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEALE, LUCY <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92104	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEALE, LUCY <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92104	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NECKELMANN, SHAWN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062-5914	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) UNIVERSAL WEATHER & AVIATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2944/4629 Rpt: 2947/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NECKELMANN, SHAWN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062-5914	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) UNIVERSAL WEATHER & AVIATION
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NED, JULI <hr/> Contributor address; City; State; Zip Code CAMPBELL, TX 75422	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INFORMATION TECHNOLOGY		Employer (See Instructions) TORCHMARK CORPORATION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEELEY, KAREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEEMIDGE, JOHN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR SOFTWARE ENGINEER		Employer (See Instructions) OVHCLLOUD US
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEEMIDGE, JOHN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR SOFTWARE ENGINEER		Employer (See Instructions) OVHCLLOUD US

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2945/4629 Rpt: 2948/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEEMIDGE, JOHN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SENIOR SOFTWARE ENGINEER		9 Employer (See Instructions) OVHCLOUD US
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEFF, DAVID <hr/> Contributor address; City; State; Zip Code BRUNSWICK, OH 44212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEFF, DEON <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20882	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEFF, DEON <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20882	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) DEON NEFF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEGRETE, CHARLOTTE <hr/> Contributor address; City; State; Zip Code ANAHEIM, CA 92806	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR		Employer (See Instructions) MT. SAN ANTONIO COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2946/4629 Rpt: 2949/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEHM, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code SEBASTOPOL, CA 95472-9420	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEHM, MICHAEL <hr/> Contributor address; City; State; Zip Code SEBASTOPOL, CA 95472-9420	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEIDIG, KATI <hr/> Contributor address; City; State; Zip Code HAYWARD, CA 94542	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEIDIG, KATI <hr/> Contributor address; City; State; Zip Code HAYWARD, CA 94542	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEIL, JODEE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SIMON GREENSTONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2947/4629 Rpt: 2950/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEILSON, MARCIE <hr/> 6 Contributor address; City; State; Zip Code CONCORD, CA 94519	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SR. BUSINESS ANALYST		9 Employer (See Instructions) W.A. HYNES & CO.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSEN, LISA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) TEXAS SOUTHERN UNIVERSITY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSEN, LISA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) TEXAS SOUTHERN UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSEN, ROXANNE <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, DEBRA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2948/4629 Rpt: 2951/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, DEBRA <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, DEBRA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, DONNA <hr/> Contributor address; City; State; Zip Code WOODBURY, MN 55125	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2949/4629 Rpt: 2952/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, ELLEN <hr/> Contributor address; City; State; Zip Code DANVILLE, CA 94526	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, JASON <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KICKAPOO TRIBE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, JASON <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KICKAPOO TRIBE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, JENNIFER <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2950/4629 Rpt: 2953/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, JUSTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SUSMAN GODFREY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, KIMBERLY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, LOY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, LOY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2951/4629 Rpt: 2954/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, RANDY	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75238		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) THOMPSONCOE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, ROXIE	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, SALLY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code APPLE VALLEY, MN 55124		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, SUE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code LUTZ, FL 33548		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, SUE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LUTZ, FL 33548		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2952/4629 Rpt: 2955/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VERNON <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VERNON <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VERONICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VERONICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VERONICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2953/4629 Rpt: 2956/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VIRGINIA <hr/> 6 Contributor address; City; State; Zip Code LAS VEGAS, NV 89135	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, VIRGINIA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89135	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEMEC, JEFFREY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NERENBERG, ALAN <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NERKEN, RUTH <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2954/4629 Rpt: 2957/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NERKEN, RUTH <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10023	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESBITT, KIRK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SYST ANSLYST		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESBITT, KIRK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SYST ANSLYST		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESEMEIER, ANN <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PRICING MGR		Employer (See Instructions) APPLIED INDUSTRIAL TECHNOLOGIES
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESEMEIER, ANN <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PRICING MGR		Employer (See Instructions) APPLIED INDUSTRIAL TECHNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2955/4629 Rpt: 2958/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESOM, GAYLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77074	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESOM, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESOM, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESOM, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESS, MARY KAY <hr/> Contributor address; City; State; Zip Code HONEOYE FALLS, NY 14472-1149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2956/4629 Rpt: 2959/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESS, MARY KAY <hr/> 6 Contributor address; City; State; Zip Code HONEOYE FALLS, NY 14472-1149	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTER, PATRICK <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTER, PATRICK <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTINGEN, MARIE <hr/> Contributor address; City; State; Zip Code WAUSAU, WI 54401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTLER, JIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) TEXAS A&M

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2957/4629 Rpt: 2960/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTLER, JIM <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) TEXAS A&M
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETH, JUSTIN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETH, JUSTIN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETSCHER, FRANCIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETSCHER, FRANCIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) UNIVERSITY OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2958/4629 Rpt: 2961/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NETZOW, PAMELA <hr/> 6 Contributor address; City; State; Zip Code ASHLAND, OR 97520	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUBAUER, ANN <hr/> Contributor address; City; State; Zip Code SHELBINA, MO 63468	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SHELBY COUNTY R-IV SCHOOL DISTRICT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUERT, MICHAEL <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMAN, DANIEL <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90049	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) UCLA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMANN, DAVID <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) APPLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2959/4629 Rpt: 2962/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMANN, DAVID <hr/> 6 Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) APPLE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMANN, DAVID <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) APPLE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMANN, DAVID <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) APPLE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMANN, DAVID <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97035	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) APPLE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMEISTER, IRENE <hr/> Contributor address; City; State; Zip Code SALINAS, CA 93907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2960/4629 Rpt: 2963/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMEYER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code ORLANDO, FL 32805	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMEYER, SUSAN <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32805	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMEYER, SUSAN <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32805	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUMEYER, SUSAN <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32805	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEUROHR, RACHEL <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20010-2192	Amount of Contribution (\$) \$3.13
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) GEORGE WASHINGTON UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2961/4629 Rpt: 2964/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEVAREZ, EMERLY <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75090	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BANKER		9 Employer (See Instructions) FIRST UNITED BANK
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEVAREZ, PONCHO <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NEVAREZ LAW GROUP, PC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEVELOW, IRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEVILLE, DANIEL <hr/> Contributor address; City; State; Zip Code WYLIE, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) PEPSICO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWBY, KIRSTIN <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2962/4629 Rpt: 2965/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWBY, KIRSTIN <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20016	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWCOMB, DEBBIE <hr/> Contributor address; City; State; Zip Code CONNEAUT, OH 44030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20011	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) CITY FIRST BANK
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWELL, ELIZABETH <hr/> Contributor address; City; State; Zip Code RIVER FOREST, IL 60305	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) CARRIAGE FLOWERS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWELL, KEVIN <hr/> Contributor address; City; State; Zip Code BROWN DEER, WI 53223	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) INVESTMENTS		Employer (See Instructions) ROYAL CAPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2963/4629 Rpt: 2966/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWKIRK, LYNN <hr/> 6 Contributor address; City; State; Zip Code LEXINGTON PARK, MD 20653	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLAN, NICHOLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTING MANAGER		Employer (See Instructions) WHOLE FOODS MARKET
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLAN, NICHOLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTING MANAGER		Employer (See Instructions) WHOLE FOODS MARKET
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLAN, NICHOLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTING MANAGER		Employer (See Instructions) WHOLE FOODS MARKET
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLAN, NICHOLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTING MANAGER		Employer (See Instructions) WHOLE FOODS MARKET

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2964/4629 Rpt: 2967/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLANDS CAMPBELL, BETH <hr/> 6 Contributor address; City; State; Zip Code CAPE ELIZABETH, ME 04107-2530	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLIN, MIKE <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLIN, MIKE <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLIN, MIKE <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLYNN, RANE <hr/> Contributor address; City; State; Zip Code PIPE CREEK, TX 78063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2965/4629 Rpt: 2968/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLYNN, RANE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PIPE CREEK, TX 78063		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLYNN, RANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PIPE CREEK, TX 78063		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWLYNN, RANE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PIPE CREEK, TX 78063		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, HARRY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TAYLOR, TX 76574		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2966/4629 Rpt: 2969/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, JAMES <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, JAMES <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, JAMIE <hr/> Contributor address; City; State; Zip Code CARRBORO, NC 27510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) RTI
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, JANICE <hr/> Contributor address; City; State; Zip Code BRONX, NY 10463	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, JUDITH <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10012	Amount of Contribution (\$) \$211.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2967/4629 Rpt: 2970/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN-POWELL, GEORGIA <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30327	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWTON, KIMBERLY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76155	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWTON, MONICA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DRIPPINGS SPRINGS ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWTOWN, SHEILA <hr/> Contributor address; City; State; Zip Code DE PEYSTER, NY 13633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEXON, NORMAN <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2968/4629 Rpt: 2971/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEXON, NORMAN <hr/> 6 Contributor address; City; State; Zip Code EVANSTON, IL 60201	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90803	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90803	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2969/4629 Rpt: 2972/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> 6 Contributor address; City; State; Zip Code LONG BEACH, CA 90803	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYER, NANCY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90803	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEYLON, MIKE <hr/> Contributor address; City; State; Zip Code ST JOSEPH, MO 64507	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NG, PETER <hr/> Contributor address; City; State; Zip Code CONOVER, NC 28613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2970/4629 Rpt: 2973/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, BRIAN <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) NVIDIA CORPORATION
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, BRIAN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NVIDIA CORPORATION
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, BRIAN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NVIDIA CORPORATION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, HUNG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, HUONG <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHARMACY TECHNICIAN		Employer (See Instructions) EXPRESS SCRIPTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2971/4629 Rpt: 2974/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, HUONG	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75051		
8 Principal occupation / Job title (See Instructions) PHARMACY TECHNICIAN		9 Employer (See Instructions) EXPRESS SCRIPTS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LIZ	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77084		
Principal occupation / Job title (See Instructions) LAB TECHNICIAN		Employer (See Instructions) REEL QUICK FILM LAB
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, LORI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) SYSTEM ANALYST		Employer (See Instructions) AEON SOLUTIONS, INC.
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, THAO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77083		
Principal occupation / Job title (See Instructions) HISTOLOGY TECHNICIAN		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGUYEN, THAO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77083		
Principal occupation / Job title (See Instructions) HISTOLOGY TECHNICIAN		Employer (See Instructions) UT MD ANDERSON CANCER CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2972/4629 Rpt: 2975/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLAS KEALOHA, SAMANTHA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code CYPRESS, TX 77433		
8 Principal occupation / Job title (See Instructions) CHIEF OF STAFF		9 Employer (See Instructions) HARRIS COUNTY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLAS KEALOHA, SAMANTHA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) HARRIS COUNTY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, JUDITH	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code WIMBERLEY, TX 78676		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, JUDITH	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code WIMBERLEY, TX 78676		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2973/4629 Rpt: 2976/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78748		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2974/4629 Rpt: 2977/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78748		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLLS, ROSALIE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78748		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, BARTHOLOMEW	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212-2052		
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHERYL	Amount of Contribution (\$) \$5.25
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHERYL	Amount of Contribution (\$) \$5.25
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2975/4629 Rpt: 2978/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, DANA <hr/> 6 Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, DANA <hr/> Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, DAVID <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, DAVID <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, MIKE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLISHING		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2976/4629 Rpt: 2979/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, MIKE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TYLER, TX 75706		
8 Principal occupation / Job title (See Instructions) PUBLISHING		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, NANCY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75706		
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, NANCY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75706		
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, NANCY	Amount of Contribution (\$) \$3.40
Contributor address; City; State; Zip Code TYLER, TX 75706		
Principal occupation / Job title (See Instructions) FIRELIGHT BOOKS		Employer (See Instructions) FIRELIGHT BOOKS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, NANCY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TYLER, TX 75706		
Principal occupation / Job title (See Instructions) FIRELIGHT BOOKS		Employer (See Instructions) FIRELIGHT BOOKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2977/4629 Rpt: 2980/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, NATHALIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78744	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) TEXAS NEURO REHABILITATION CENTER
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, NATHALIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) TEXAS NEURO REHABILITATION CENTER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2978/4629 Rpt: 2981/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> 6 Contributor address; City; State; Zip Code GLENVIEW, IL 60025	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2979/4629 Rpt: 2982/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> 6 Contributor address; City; State; Zip Code GLENVIEW, IL 60025	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLSON, BARBARA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICKENS, FREDERICK <hr/> Contributor address; City; State; Zip Code MELISSA, TX 75454	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) MISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2980/4629 Rpt: 2983/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICKLE, MARGARET	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code LOOMIS, CA 95650		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICOLAE, CRISTINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75243		
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) CRISTINA NICOLAE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICOLAS, EMILIO	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICOLAS, GUILLERMO	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICOLAS, GUILLERMO	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2981/4629 Rpt: 2984/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEDERLEHNER, JOHN <hr/> 6 Contributor address; City; State; Zip Code MCLEAN, VA 22101	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) AIR LINE PILOTS ASSOCIATION
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEDERLEHNER, JOHN <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) AIR LINE PILOTS ASSOCIATION
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEDERLEHNER, JOHN <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) AIR LINE PILOTS ASSOCIATION
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIELSEN, DAVID <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIELSEN, DAVID <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2982/4629 Rpt: 2985/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, BOBBY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code QUINLAN, TX 75474		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, BOBBY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code QUINLAN, TX 75474		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, BOBBY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code QUINLAN, TX 75474		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, BOBBY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code QUINLAN, TX 75474		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, BOBBY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code QUINLAN, TX 75474		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2983/4629 Rpt: 2986/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, BOBBY <hr/> 6 Contributor address; City; State; Zip Code QUINLAN, TX 75474	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2984/4629 Rpt: 2987/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> 6 Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, JOANNE <hr/> Contributor address; City; State; Zip Code FERNANDINA BEACH, FL 32034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2985/4629 Rpt: 2988/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, TOMMIE <hr/> 6 Contributor address; City; State; Zip Code QUINLAN, TX 75474	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, TOMMIE <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, TOMMIE <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMAN, TOMMIE <hr/> Contributor address; City; State; Zip Code QUINLAN, TX 75474	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEMANN, JUDITH <hr/> Contributor address; City; State; Zip Code ARVADA, CO 80007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2986/4629 Rpt: 2989/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIENHAUS, YOLANDA <hr/> 6 Contributor address; City; State; Zip Code CHESTERFIELD, MO 63017	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIESE, GARY <hr/> Contributor address; City; State; Zip Code FAIRBANKS, AK 99701	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIEVES, WANDA <hr/> Contributor address; City; State; Zip Code HOWELL, NJ 07731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIGRO, KIRSTEN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIGRO, KIRSTEN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2987/4629 Rpt: 2990/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIKOLATOS, JOHN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228-2003	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIKOLATOS, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78228-2003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NILSEN, BENJAMIN <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94589	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) PROCESS TECHNICIAN II		Employer (See Instructions) THERMO FISHER SCIENTIFIC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NILSEN, BENJAMIN <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94589	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROCESS TECHNICIAN II		Employer (See Instructions) THERMO FISHER SCIENTIFIC
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NILSSON, PATTY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SPRING BRANCH ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2988/4629 Rpt: 2991/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NILSSON, PATTY <hr/> 6 Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SPRING BRANCH ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NINI, AMY <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, TX 78940	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) COTTAGE OWNER		Employer (See Instructions) SELF EMLPOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NINO, IVAN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMIN		Employer (See Instructions) EP COUNTY
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NINO, IVAN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMIN		Employer (See Instructions) EP COUNTY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NISBETT, CLARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2989/4629 Rpt: 2992/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NISIMBLAT, OSKAR	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78717		
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) KRISTIN
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NISPEL, SHANNA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95135		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NISPEL, SHANNA	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95135		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NITSCHKE, JOAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NITSCHKE, JOAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2990/4629 Rpt: 2993/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NITSCHKE, JOAN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NITSCHKE, JOAN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NITZBERG, NEIL J <hr/> Contributor address; City; State; Zip Code PORT MATILDA, PA 16870-8329	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIX, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIX, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2991/4629 Rpt: 2994/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIXON, AUSTIN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BROOKLYN, NY 11238		
8 Principal occupation / Job title (See Instructions) RESTAURANT MANAGER		9 Employer (See Instructions) QUALITY BRANDED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIXON, LLANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIXON, PATRICIA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WINSTON SALEM, NC 27104-2630		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WAKE FOREST UNIVERSITY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIZAMI, MOHAMMED	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KINGWOOD, TX 77339		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIZZA, DIANE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2992/4629 Rpt: 2995/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, DEBORAH	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code EUGENE, OR 97405		
8 Principal occupation / Job title (See Instructions) BUSINESS		9 Employer (See Instructions) WWFP
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) AUSA		Employer (See Instructions) US ATTORNEYS OFC EDTX
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) AUSA		Employer (See Instructions) US ATTORNEYS OFC EDTX
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, KRISTY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) TIRION SOLUTIONS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, KRISTY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75228		
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) TIRION SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2993/4629 Rpt: 2996/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, SHANNON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, SHANNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLES, JEFFERY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HUSCH BLACKWELL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLES, JEFFERY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HUSCH BLACKWELL
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLES, JEFFERY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BEIRNE, MAYNARD & PARSONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2994/4629 Rpt: 2997/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLES, JEFFERY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) BEIRNE, MAYNARD & PARSONS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NODA, ANALILY <hr/> Contributor address; City; State; Zip Code RALEIGH, NC 27610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMISSIONS DIRECTOR		Employer (See Instructions) MONTE NIDO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOEL, CHERIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOEL, CHERIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOKES, JILL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-3721	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2995/4629 Rpt: 2998/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOKES, JILL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751-3721	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOKES, JILL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-3721	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOKES, JILL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLAN, LAWRENCE <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLAN, LAWRENCE <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2996/4629 Rpt: 2999/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLAN, LAWRENCE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAINT LOUIS, MO 63105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLAN, LAWRENCE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAINT LOUIS, MO 63105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLDE, KAHLYNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LONE STAR CIRCLE OF CARE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLDE, KAHLYNE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LONE STAR CIRCLE OF CARE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLE, AMELIA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 79249		
Principal occupation / Job title (See Instructions) PHYSICAL		Employer (See Instructions) PHYSICAL THERAPY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2997/4629 Rpt: 3000/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLEN, EVELYN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77019		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLIN, PAIGE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code POQUOSON, VA 23662		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLIN, STEVEN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77092		
Principal occupation / Job title (See Instructions) TECH SUPPORT		Employer (See Instructions) IBM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOODLEMAN, LOUIS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92124-1319		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORA, HOPE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HUTTO, TX 78634		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2998/4629 Rpt: 3001/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORA, HOPE <hr/> 6 Contributor address; City; State; Zip Code HUTTO, TX 78634	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORCROSS, JULIE <hr/> Contributor address; City; State; Zip Code BOYNE CITY, MI 49712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORCROSS, JULIE <hr/> Contributor address; City; State; Zip Code BOYNE CITY, MI 49712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORCROSS, JULIE <hr/> Contributor address; City; State; Zip Code BOYNE CITY, MI 49712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORDAHL, THOMAS <hr/> Contributor address; City; State; Zip Code DAVIS, CA 95616	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR EMERITUS		Employer (See Instructions) UCD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2999/4629 Rpt: 3002/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORDAHL, THOMAS <hr/> 6 Contributor address; City; State; Zip Code DAVIS, CA 95616	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) PROFESSOR EMERITUS		9 Employer (See Instructions) UCD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORDBY, CHAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702-4708	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) TECHNOLOGY RECOVERY GROUP LTD
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORELLI, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORELLI, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORIEGA, MELISSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3000/4629 Rpt: 3003/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORIEGA, MELISSA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORMAN, JOHN <hr/> Contributor address; City; State; Zip Code FLORENCE, TX 76527	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORMAN, JOHN <hr/> Contributor address; City; State; Zip Code FLORENCE, TX 76527	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORMAN, JOHN <hr/> Contributor address; City; State; Zip Code FLORENCE, TX 76527	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORMAN, KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702-1040	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TYLER ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3001/4629 Rpt: 3004/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, BARBARA <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97267	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, DANYAHEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CITY OF HOUSTON
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, JANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, KELLIE <hr/> Contributor address; City; State; Zip Code JACKSON, MI 49202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3002/4629 Rpt: 3005/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORSWORTHY, TIMOTHY <hr/> Contributor address; City; State; Zip Code MILLBURN, NJ 07041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) BRISTOL MYERS SQUIBB
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORSWORTHY, TIMOTHY <hr/> Contributor address; City; State; Zip Code MILLBURN, NJ 07041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) BRISTOL MYERS SQUIBB
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORSWORTHY, TIMOTHY <hr/> Contributor address; City; State; Zip Code MILLBURN, NJ 07041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) BRISTOL MYERS SQUIBB
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTH, AMY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-2361	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) ASL INTERPRETER		Employer (See Instructions) 3 BRIDGES SIGN LANGUAGE SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3003/4629 Rpt: 3006/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTH, LAURA <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROGRAM/PROJECT MANAGER		9 Employer (See Instructions) CENCORA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTH, LAURA <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROGRAM/PROJECT MANAGER		Employer (See Instructions) CENCORA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTH, LAURA <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) CENCORA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTHCUTT, GAIL <hr/> Contributor address; City; State; Zip Code COVINGTON, KY 41011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTHCUTT, GAIL <hr/> Contributor address; City; State; Zip Code COVINGTON, KY 41011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3004/4629 Rpt: 3007/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTHRUP, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75206	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) COWLES & THOMPSON, P.C.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON, CYNTHIA <hr/> Contributor address; City; State; Zip Code OAKTON, VA 22124	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON, ELLEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$42.13
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON, GWEN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130-3668	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON, JANET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3005/4629 Rpt: 3008/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON, NICK <hr/> 6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84105	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOSEK, NICOLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$2,785.00
Principal occupation / Job title (See Instructions) CHAIR		Employer (See Instructions) TEXANS FOR REASONABLE SOLUTIONS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVICK, GAYLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVINSON, JOHN <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVOA, BEN <hr/> Contributor address; City; State; Zip Code MERRILLVILLE, IN 46411	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3006/4629 Rpt: 3009/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVOA, BEN <hr/> 6 Contributor address; City; State; Zip Code MERRILLVILLE, IN 46411	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOW, CHARTER SCHOOLS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) EDUCATION ADVOCACY		Employer (See Instructions) CHARTER SCHOOLS NOW
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOWLIN, JAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOWOTNY, LISA <hr/> Contributor address; City; State; Zip Code RAISIN, TX 77905	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOYES, JAMES <hr/> Contributor address; City; State; Zip Code HILTON HEAD ISALND, SC 29928	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3007/4629 Rpt: 3010/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOYES, JAMES	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HILTON HEAD ISALND, SC 29928		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOYES, JAMES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HILTON HEAD ISALND, SC 29928		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NTIAMOAH, BARBARA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CHANDLER, AZ 85286		
Principal occupation / Job title (See Instructions) FINANCIAL SERVICES REP		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUCKOLS, TOM	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUCKOLS, TOM	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3008/4629 Rpt: 3011/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUGENT, MARY FLOOD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BENEFITS MGR		9 Employer (See Instructions) NUGENT AND PETERSON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUGENT, MARY FLOOD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BENEFITS MGR		Employer (See Instructions) NUGENT AND PETERSON
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NULL, KATHLEEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUNEZ, ALMA <hr/> Contributor address; City; State; Zip Code STAFFORD, TX 77477	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUNN, GREGORY <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3009/4629 Rpt: 3012/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NURSE, NOAH <hr/> 6 Contributor address; City; State; Zip Code MANSFIELD, TX 76063	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT ARLINGTON
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NURSE PRACTITIONERS, TEXAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUSS, MELYNDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUSS, MELYNDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NWABARA, OBES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATA ANALYTICS SPECIALIST		Employer (See Instructions) ENBRIDGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3010/4629 Rpt: 3013/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NWABARA, OBES	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77056		
8 Principal occupation / Job title (See Instructions) DATA ANALYTICS SPECIALIST		9 Employer (See Instructions) ENBRIDGE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NWABARA, OBES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) CATEGORY MANAGER		Employer (See Instructions) ENBRIDGE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NWABARA, OBES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) CATEGORY MANAGER		Employer (See Instructions) ENBRIDGE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NYE, JULIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUGEMONT, NC 27572-6500		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NYE, JULIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUGEMONT, NC 27572-6500		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3011/4629 Rpt: 3014/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NYUL, DEBRA <hr/> 6 Contributor address; City; State; Zip Code FW, TX 76110-1714	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNELL, MAGGIE <hr/> Contributor address; City; State; Zip Code KENSINGTON, MD 20895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) DANAHER
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNELL, MAURA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNOR, GARY <hr/> Contributor address; City; State; Zip Code POWDERLY, TX 75473	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNOR, NATALIE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) FORTRESS BAY EDUCATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3012/4629 Rpt: 3015/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'DETTE, DAVID <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20003	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MUSICIAN		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LEARY, KAITLYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LEARY, KAITLYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LEARY, KAITLYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LOUGHLIN, NANCY <hr/> Contributor address; City; State; Zip Code TURNER, OR 97392	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3013/4629 Rpt: 3016/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LOUGHLIN, VALERIE <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LOUGHLIN, VALERIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'LOUGHLIN, VALERIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEIL, JAMIE <hr/> Contributor address; City; State; Zip Code DESERT HOT SPRINGS, CA 92241	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PALM SPRINGS USD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEIL, JAMIE <hr/> Contributor address; City; State; Zip Code DESERT HOT SPRINGS, CA 92241	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PALM SPRINGS USD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3014/4629 Rpt: 3017/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEIL, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code HILLSBORO, OR 97124-8151	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEIL, MICHAEL <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124-8151	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEIL, MICHAEL <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124-8151	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEIL, MICHAEL <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124-8151	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEILL, LYNN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3015/4629 Rpt: 3018/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEILL, LYNN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'NEILL, SANDRA <hr/> Contributor address; City; State; Zip Code MADBURY, NH 03823	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'REILLY, ALANA <hr/> Contributor address; City; State; Zip Code GLENSIDE, PA 19038	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) FOX CHASE CANCER CENTER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'REILLY, DEBBIE <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PERSONAL TRAINING		Employer (See Instructions) YMCA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'REILLY, DEBBIE <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PERSONAL TRAINING		Employer (See Instructions) YMCA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3016/4629 Rpt: 3019/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'REILLY, DEBBIE	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code FRISCO, TX 75036		
8 Principal occupation / Job title (See Instructions) PERSONAL TRAINING		9 Employer (See Instructions) YMCA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'REILLY, MAUREEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DEARBORN, MI 48124		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'RORKE, ELIZABETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAS CRUCES, NC 88012-6277		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'ROURKE, BETO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EL PASO, TX 79902-3822		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'ROURKE, BETO	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EL PASO, TX 79902-3822		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3017/4629 Rpt: 3020/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'ROURKE, ROBERT <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'ROURKE, ROBERT <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'ROURKE, ROBERT <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'ROURKE, ROBERT <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'SULLIVAN, EDDIE <hr/> Contributor address; City; State; Zip Code BRENTWOOD, NY 11717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3018/4629 Rpt: 3021/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OAKEY, LINDA <hr/> 6 Contributor address; City; State; Zip Code WOODBRIDGE, VA 22192	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OATES, TENA <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OATES, TENA <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBEROI, RICKI <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) RESTAURATEUR OWNER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBOYLE, DOUG <hr/> Contributor address; City; State; Zip Code BURKE, VA 22015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3019/4629 Rpt: 3022/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBRIEN, GERARD	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code BREA, CA 92821		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBRIEN, GERARD	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code BREA, CA 92821		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBRIEN, MARILYN	Amount of Contribution (\$) \$13.32
Contributor address; City; State; Zip Code DENVER, CO 80220		
Principal occupation / Job title (See Instructions) UNIT 801		Employer (See Instructions) RETIRED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCANAS, GILBERTO	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) PUBLIC AFFAIRS STRATEGIST		Employer (See Instructions) OCANAS GROUP
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCANAS, GILBERTO	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) PUBLIC AFFAIRS STRATEGIST		Employer (See Instructions) OCANAS GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3020/4629 Rpt: 3023/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCANAS, GILBERTO <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PUBLIC AFFAIRS STRATEGIST		9 Employer (See Instructions) OCANAS GROUP
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCHOA, ANNE <hr/> Contributor address; City; State; Zip Code LAGO VISTA, TX 78645	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCHOA, OMAR <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) OMAR OCHOA LAW FIRM PC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCKEY, LEE <hr/> Contributor address; City; State; Zip Code MODESTO, CA 95354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCONNOR, BARBARA <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PERSONAL ATTENDANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3021/4629 Rpt: 3024/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCONNOR, BARBARA <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77301	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PERSONAL ATTENDANT		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCONNOR, THOMAS <hr/> Contributor address; City; State; Zip Code SUPERIOR, CO 80027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CLICKHOUSE, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODOM, JAMIE LEE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODOM, LAURA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING AND SALES MANAGER		Employer (See Instructions) FIRELIGHT BOOKS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODOM, LAURA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING AND SALES MANAGER		Employer (See Instructions) FIRELIGHT BOOKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3022/4629 Rpt: 3025/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODOM, LAURA <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75706	7 Amount of Contribution (\$) \$69.78
8 Principal occupation / Job title (See Instructions) EXECUTIVE ADMINISTRATOR		9 Employer (See Instructions) FIRELIGHT BOOKS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ODONNELL, HELEN <hr/> Contributor address; City; State; Zip Code BEAVER, PA 15009-2823	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OELKE, ROBERT <hr/> Contributor address; City; State; Zip Code MONTELLO, WI 53949	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OELSNER, LESLIE <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SSOCIAL WORKER		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OELSNER, LESLIE <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SSOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3023/4629 Rpt: 3026/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OERTEL, LAUREN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78754	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ORGANIZER		9 Employer (See Instructions) INDIVISIBLE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OESER, MARY <hr/> Contributor address; City; State; Zip Code BRATTLEBORO, VT 05302	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OFTEDAHL, SANDY <hr/> Contributor address; City; State; Zip Code WAUPACA, WI 54981	Amount of Contribution (\$) \$262.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN PROJECT MANAGER		Employer (See Instructions) TARGET
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OFURHIE, JULIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478-5482	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OFURHIE, JULIAN <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478-5482	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3024/4629 Rpt: 3027/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGAN, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		9 Employer (See Instructions) PARTNERSHIP/SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGAN, CAROLYN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMPUTER PROGRAMMER		Employer (See Instructions) PARTNERSHIP/SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGAN, PIPER <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CRAFTER		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGAN, PIPER <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGAN, PIPER <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CRAFTER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3025/4629 Rpt: 3028/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGET, MARGARET <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) AUSTIN PRESBYTERIAN THEOLOGICAL SEMINARY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGET, MARGARET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) AUSTIN PRESBYTERIAN THEOLOGICAL SEMINARY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLESBY, CHARLES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLESBY, CHARLES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLESBY, CHARLES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3026/4629 Rpt: 3029/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLETREE, JOHN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77095	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PASTOR		9 Employer (See Instructions) FIRST METROPOLITAN CHURCH
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLETREE, NEVOLIA <hr/> Contributor address; City; State; Zip Code EWING, NJ 08628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGLETREE, SHIRLEY <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS STATE
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGRADY, PATRICIA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGRADY, PATRICIA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3027/4629 Rpt: 3030/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGRADY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGUGUA, UGWUNNA <hr/> Contributor address; City; State; Zip Code BRONX, NY 10466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) BESMATCH REAL ESTATE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OHARE, MEGHAN <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) SCHOOL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OHIDY, SANDRA <hr/> Contributor address; City; State; Zip Code FORT WHITE, FL 32038	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OHLENDORF, GEORGE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3028/4629 Rpt: 3031/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OHLSSON, HOLLY <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77494	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OHRSTROM, GEORGE <hr/> Contributor address; City; State; Zip Code BERRYVILLE, VA 22611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJEDA, SARAH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> Contributor address; City; State; Zip Code WILDWOOD, MO 63011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> Contributor address; City; State; Zip Code WILDWOOD, MO 63011	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3029/4629 Rpt: 3032/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> 6 Contributor address; City; State; Zip Code WILDWOOD, MO 63011	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> Contributor address; City; State; Zip Code WILDWOOD, MO 63011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> Contributor address; City; State; Zip Code WILDWOOD, MO 63011	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> Contributor address; City; State; Zip Code WILDWOOD, MO 63011	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJILE, JUDITH R <hr/> Contributor address; City; State; Zip Code WILDWOOD, MO 63011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3030/4629 Rpt: 3033/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OKAFOR, ALEXANDER	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OKAFOR, ALEXANDER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OKRZESIK, KATIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75208		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLAFSON, PIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) USDA
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLAFSON, PIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code KERRVILLE, TX 78028		
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) USDA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3031/4629 Rpt: 3034/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLAGOROYE, OLUWAFEMI <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77494	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ENTREPRENEUR		9 Employer (See Instructions) MYSELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLDHAM, PAMELA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) PAMELA OLDHAM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLDNER, MARY ANN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLDNER, MARY ANN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLDNER, MARY ANN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3032/4629 Rpt: 3035/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, JULIETTE <hr/> 6 Contributor address; City; State; Zip Code ASCUTNEY, VT 05030	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) HOME CARE PROVIDER		9 Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SANDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SANDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3033/4629 Rpt: 3036/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> 6 Contributor address; City; State; Zip Code BEAVERTON, OR 97008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97008	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97008	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97008	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> Contributor address; City; State; Zip Code BEAVERTON, OR 97008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3034/4629 Rpt: 3037/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY, SHEA <hr/> 6 Contributor address; City; State; Zip Code BEAVERTON, OR 97008	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLEARY HELMERS, M E <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLESON, SUSAN <hr/> Contributor address; City; State; Zip Code FARMINGTON, MI 48336	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLINGER, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLINGER, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3035/4629 Rpt: 3038/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLINGER, JAMES	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVA, JESSE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77089		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FULTON COUNTY SCHOOLS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVA, JESSE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77089		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FULTON COUNTY SCHOOLS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVARES, BETTINA	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) PUBLIC ADMINISTRATOR		Employer (See Instructions) CITY OF EL PASO
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVAS-RODRIGUEZ, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79904		
Principal occupation / Job title (See Instructions) MEDICAL CODER		Employer (See Instructions) RIO GRANDE UROLOGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3036/4629 Rpt: 3039/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVAS-WAY, TERRI <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVE, KENNETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) OLIVEGRPC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVE, MARILYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76177-7394	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVEIRA, DAVID <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVEIRA, DAVID <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3037/4629 Rpt: 3040/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, BRIANA <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11231	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SENIOR MANAGER		9 Employer (See Instructions) CANOE INTELLIGENCE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, CHARLES <hr/> Contributor address; City; State; Zip Code EWING, NJ 08628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, DANA <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, DAVID <hr/> Contributor address; City; State; Zip Code ROCLAND ME, ME 04841	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, JULIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) ATTY		Employer (See Instructions) BEACONHILL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3038/4629 Rpt: 3041/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUBURN, ME 04210		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUBURN, ME 04210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code AUBURN, ME 04210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code AUBURN, ME 04210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER, MICHAEL	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code AUBURN, ME 04210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3039/4629 Rpt: 3042/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER-PARROTT, ALICE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) MEDIATOR/ARBITRATOR		9 Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLIVER-SMITH, ANTHONY <hr/> Contributor address; City; State; Zip Code GAINESVILLE, FL 32605	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLER, STEVEN <hr/> Contributor address; City; State; Zip Code ROCHESTER, NY 14616	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL MERCHANDISER/REMODELER		Employer (See Instructions) QUEST SERVICE GROUP
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLER, STEVEN <hr/> Contributor address; City; State; Zip Code ROCHESTER, NY 14616	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL MERCHANDISER/REMODELER		Employer (See Instructions) QUEST SERVICE GROUP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLES, AMY <hr/> Contributor address; City; State; Zip Code BENBROOK, TX 76126	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) LOCKHEED MARTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3040/4629 Rpt: 3043/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLES, AMY <hr/> 6 Contributor address; City; State; Zip Code BENBROOK, TX 76126	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) LOCKHEED MARTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLESTAD, KRISTI <hr/> Contributor address; City; State; Zip Code BOTHHELL, WA 98021	Amount of Contribution (\$) \$16.66
Principal occupation / Job title (See Instructions) VINTAGE REHOME		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLIER-INGLE, LESLIE <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLLOVE, SARAH <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19147	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) THEATER ARTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLOUGHLIN, NANCY <hr/> Contributor address; City; State; Zip Code TURNER, OR 97392	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3041/4629 Rpt: 3044/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLOUGHLIN, NANCY <hr/> 6 Contributor address; City; State; Zip Code TURNER, OR 97392	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLOUGHLIN, NANCY <hr/> Contributor address; City; State; Zip Code TURNER, OR 97392	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLOUGHLIN, NANCY <hr/> Contributor address; City; State; Zip Code TURNER, OR 97392	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLPHIE, SANDRA B <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NONE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLPHIE, SANDRA B <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3042/4629 Rpt: 3045/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSEN, DIANE <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CURATOR		9 Employer (See Instructions) MOODY GARDENS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSEN, DIANE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CURATOR		Employer (See Instructions) MOODY GARDENS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, ALLEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, ALLEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, ALLEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3043/4629 Rpt: 3046/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, DIANA <hr/> 6 Contributor address; City; State; Zip Code SCIO, OR 97374	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) FARMING		9 Employer (See Instructions) SELF FARMING
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, DIANA <hr/> Contributor address; City; State; Zip Code SCIO, OR 97374	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, ELSIE <hr/> Contributor address; City; State; Zip Code CONYERS, GA 30012	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FREELANCE ARTIST		Employer (See Instructions) ELSIE OLSON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, JONATHAN <hr/> Contributor address; City; State; Zip Code LYNNWOOD, WA 98037	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) UNIVERSITY OF PHOENIX
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, LYNDON <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3044/4629 Rpt: 3047/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, LYNDON	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code WACO, TX 76710		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, LYNDON	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, MARCELLA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) POPE, HARDWICKE, CHRISTIE, SCHELL, KELLY &
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, MARCELLA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) POPE, HARDWICKE, CHRISTIE, SCHELL, KELLY &
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, MARCELLA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) POPE, HARDWICKE, CHRISTIE, SCHELL, KELLY &

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3045/4629 Rpt: 3048/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, RON <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75204	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, RYAN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS BEARD COMPANY
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, RYAN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS BEARD COMPANY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, RYAN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS BEARD COMPANY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSON, SUSANNE <hr/> Contributor address; City; State; Zip Code MONROE, WA 98272	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3046/4629 Rpt: 3049/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSSON, LESLIE <hr/> 6 Contributor address; City; State; Zip Code ALVORD, TX 76225	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSSON, LESLIE <hr/> Contributor address; City; State; Zip Code ALVORD, TX 76225	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMALLEY, KATHLEEN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) WHOLE FOODS MARKET
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMARKHAIL, KATHRYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMARKHAIL, KATHRYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) BAYLOR SCOTT & WHITE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3047/4629 Rpt: 3050/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OMIELAN, JOSEPH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LEXINGTON, KY 40517		
8 Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		9 Employer (See Instructions) UNIVERSITY OF KENTUCKY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEAL, BYRON	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FORT BEND COUNTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEAL, KELLY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75207		
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEAL SHIMEK, BECKY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEAL SHIMEK, BECKY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3048/4629 Rpt: 3051/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEILL, KATHY <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEILL, NATALIE <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONG, PEGGY <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3049/4629 Rpt: 3052/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CLS HEALTH
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3050/4629 Rpt: 3053/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) CLS HEALTH
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CLH HEALTH
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CLH HEALTH
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONORATO, MICHELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CLS HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3051/4629 Rpt: 3054/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONSTAD, JO-EL <hr/> 6 Contributor address; City; State; Zip Code SEGUIN, TX 78155	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONSTAD, JO-EL <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONSTAD, JO-EL <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONUFER, ELAINE <hr/> Contributor address; City; State; Zip Code REDWOOD CITY, CA 94061	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPARANOZIE, TERI <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SAM HOUSTON STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3052/4629 Rpt: 3055/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPPERMAN, ANNE <hr/> 6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPPERMANN, WILLIAM <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORDO, ZACHARY <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15203	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR EDUCATION SPECIALIST		Employer (See Instructions) ESRI
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORKUN, MARIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SPECIAL PROJECTS MANAGER		Employer (See Instructions) TIADA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORLICH, SHIRLEY <hr/> Contributor address; City; State; Zip Code CLAYTON, CA 94517	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3053/4629 Rpt: 3056/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORMAN, ADAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RESTAURATEUR		9 Employer (See Instructions) LOCA DORO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORMSBEE-HALE, ANTHONY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76085	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) HUMANKIND CONSULTING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OROZCO, SARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR SPECIALIST		Employer (See Instructions) DEPT OF ARMY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORPEN, SHER <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) LOCKHEED MARTIN
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, ANGELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) IRVING ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3054/4629 Rpt: 3057/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, ANGELA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75243		
8 Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		9 Employer (See Instructions) IRVING ISD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, ANITA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) CASE WORKER		Employer (See Instructions) DEPT FAMILY PROTECT SERVICES
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, ANITA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) CASE WORKER		Employer (See Instructions) DEPT FAMILY PROTECT SERVICES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, BILL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, BILL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3055/4629 Rpt: 3058/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, BILL <hr/> 6 Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, CAROL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) PUBLISHING		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, CAROL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PUBLISHING		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, EDDIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, JANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3056/4629 Rpt: 3059/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, JANIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78705	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, JANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, LINDA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, LINDA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR, TRENT <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3057/4629 Rpt: 3060/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR HEATH, ANGELA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75243	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		9 Employer (See Instructions) IRVING ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR HEATH, ANGELA <hr/> Contributor address; City; State; Zip Code HEARTLAND, TX 75126	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) IRVING ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR HEATH, ANGELA <hr/> Contributor address; City; State; Zip Code HEARTLAND, TX 75126	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) IRVING ISD
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORR HEATH, ANGELA <hr/> Contributor address; City; State; Zip Code HEARTLAND, TX 75126	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) IRVING ISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORRICO, MARIO <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60631	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3058/4629 Rpt: 3061/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORT, KELLY <hr/> 6 Contributor address; City; State; Zip Code MONKTON, MD 21111	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) DIETITIAN		9 Employer (See Instructions) UNIV OF MD MED CENTER
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORT, KELLY <hr/> Contributor address; City; State; Zip Code MONKTON, MD 21111	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) UNIV OF MD MED CENTER
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORT, KELLY <hr/> Contributor address; City; State; Zip Code MONKTON, MD 21111	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) UNIV OF MD MED CENTER
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTA, JOSE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTA, JOSE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3059/4629 Rpt: 3062/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTA, JOSE <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTA, JOSE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTA, JOSE <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTEGA, ADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CORPORATE COMMUNICATIONS MANAGER		Employer (See Instructions) COMMUNITY FIRST HEALTH PLANS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTEGA, RICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3060/4629 Rpt: 3063/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIX, JORGE <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76543	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIX, JORGE <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76543	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, ANDRE <hr/> Contributor address; City; State; Zip Code KINGSVILLE, TX 78363	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EVALUATOR		Employer (See Instructions) KETT ENGINEERING
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CAROL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CAROL <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3061/4629 Rpt: 3064/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CHARLES <hr/> 6 Contributor address; City; State; Zip Code MANHATTAN, NY 10029	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CHARLES <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10029	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CHARLES <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10029	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CHARLES <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10029	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, CHARLES <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10029	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3062/4629 Rpt: 3065/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code VISTA, CA 92083		
8 Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		9 Employer (See Instructions) DTEK LABORATORIES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code VISTA, CA 92083		
Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		Employer (See Instructions) DTEK LABORATORIES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code VISTA, CA 92083		
Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		Employer (See Instructions) DTEK LABORATORIES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code VISTA, CA 92083		
Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		Employer (See Instructions) DTEK LABORATORIES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code VISTA, CA 92083		
Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		Employer (See Instructions) DTEK LABORATORIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3063/4629 Rpt: 3066/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE <hr/> 6 Contributor address; City; State; Zip Code VISTA, CA 92083	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		9 Employer (See Instructions) DTEK LABORATORIES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE <hr/> Contributor address; City; State; Zip Code VISTA, CA 92083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		Employer (See Instructions) DTEK LABORATORIES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JEANNIE <hr/> Contributor address; City; State; Zip Code VISTA, CA 92083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAB TECH; TEACHER, ARTIST		Employer (See Instructions) DTEK LABORATORIES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JOSE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75038	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ORTIZ LAW FIRM
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JOSE <hr/> Contributor address; City; State; Zip Code IRVING, TX 75038	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ORTIZ LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3064/4629 Rpt: 3067/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, JOSE <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75038	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ORTIZ LAW FIRM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, MANUELA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602-3103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTIZ, MANUELA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94602-3103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTON, MICA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HOME MANAGER		Employer (See Instructions) MYSELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTON, MICA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HOME MANAGER		Employer (See Instructions) MYSELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3065/4629 Rpt: 3068/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORTON, MICA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
8 Principal occupation / Job title (See Instructions) HOME MANAGER		9 Employer (See Instructions) MYSELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSA, OSAGUONA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ALPHARETTA, GA 30004		
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) TEAMH
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MEMPHIS, TN 38111		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MEMPHIS, TN 38111		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MEMPHIS, TN 38111		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3066/4629 Rpt: 3069/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, PRESTON K. <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MAYER LLP
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, PRESTON K. <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MAYER LLP
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, VIOLA <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORN, VIOLA <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DANA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) VPGM		Employer (See Instructions) HEIDELBERG MATERIALS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3067/4629 Rpt: 3070/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DAVID <hr/> 6 Contributor address; City; State; Zip Code HURST, TX 76054	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DAVID <hr/> Contributor address; City; State; Zip Code HURST, TX 76054	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DYLAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TREASURER		Employer (See Instructions) HARRIS COUNTY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DYLAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TREASURER		Employer (See Instructions) HARRIS COUNTY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DYLAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TREASURER		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3068/4629 Rpt: 3071/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, DYLAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) TREASURER		9 Employer (See Instructions) HARRIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703-2234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, JANE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, JANE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, STACEY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) BUSINESS INTEGRATION SPECIALIST		Employer (See Instructions) BOEING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3069/4629 Rpt: 3072/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBORNE, STACEY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$140.00
8 Principal occupation / Job title (See Instructions) BUSINESS INTEGRATION SPECIALIST		9 Employer (See Instructions) BOEING
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, BENA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, BENA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, BENA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, BENA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3070/4629 Rpt: 3073/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, COLT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) POLITICAL OPERATIVE		9 Employer (See Instructions) BEXAR COUNTY COORDINATED CAMPAIGN
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, COLT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLITICAL OPERATIVE		Employer (See Instructions) BEXAR COUNTY COORDINATED CAMPAIGN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, COLT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR INFRASTRUCTURE ANALYST		Employer (See Instructions) COUNCILMAN JOHN COURAGE DISTRICT 9 SAN ANTONIO
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBURN, COLT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR INFRASTRUCTURE ANALYST		Employer (See Instructions) COUNCILMAN JOHN COURAGE DISTRICT 9 SAN ANTONIO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSBY, SHAMANDA <hr/> Contributor address; City; State; Zip Code UPPER MARLBORO, MD 20774	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) FED GOVT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3071/4629 Rpt: 3074/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSHATZ, DONNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSHATZ, DONNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSHATZ, DONNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSHAUGHNESSY, PATRICIA <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60563	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSHAUGHNESSY, PATRICIA <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60563	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3072/4629 Rpt: 3075/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSHAUGHNESSY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code NAPERVILLE, IL 60563	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSIKA, BETSY <hr/> Contributor address; City; State; Zip Code MOKENA, IL 60448	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSIKA, BETSY <hr/> Contributor address; City; State; Zip Code APPLE RIVER, IL 61001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSOFSKY, WILLIAM <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSOFSKY, WILLIAM <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3073/4629 Rpt: 3076/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSOFSKY, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSOFSKY, WILLIAM <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87194	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSORIA, PATRICIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSORIA, PATRICIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSORIA, PATRICIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3074/4629 Rpt: 3077/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSOWSKI, KEN <hr/> 6 Contributor address; City; State; Zip Code DIXON, CA 95620	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSSEMI-SEIED, JULIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) HCFCD
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSTAPIK, JUDITH <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94127	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSTFELD, NAOMI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NAOMI S. OSTFELD, ATTORNEY-AT-LAW
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSTROFF, PAUL <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19115	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3075/4629 Rpt: 3078/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSTROFF, PAUL <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSTROOT, JOHN <hr/> Contributor address; City; State; Zip Code GOLDEN VALLEY, MN 55422	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSUJI, EDMOND <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSULLIVAN, THERESA <hr/> Contributor address; City; State; Zip Code EVERGREEN, CO 80439	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSULLIVAN, THERESA <hr/> Contributor address; City; State; Zip Code EVERGREEN, CO 80439-5215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3076/4629 Rpt: 3079/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTHMAN, ALI <hr/> 6 Contributor address; City; State; Zip Code BREMERTON, WA 98312	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) WASHINGTON STATE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTOSHI, JOHN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTOSHI, JOHN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTT, MARY <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68135	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OTTERY, HEATHER <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) PERSONAL SHOPPER		Employer (See Instructions) WALMART

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3077/4629 Rpt: 3080/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OUSLEY, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ELEMENTARY SCHOOL TEACHER		9 Employer (See Instructions) AUSTIN ISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OUTLER, ASHLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77045	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF BUSINESS DEVELOPMENT		Employer (See Instructions) THE BIRCHWOOD OF GOLFCREST
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OUZILLOU, YAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) Y'ALLA COLLABORATIVE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERLY, KATHY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) FLORA LINES
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERLY, KATHY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) FLORA LINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3078/4629 Rpt: 3081/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERLY, KATHY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) FLORA LINES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERMAN, STACY <hr/> Contributor address; City; State; Zip Code STILWELL, KS 66085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECH WRITER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, CAROLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, CAROLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, CHRISTINA <hr/> Contributor address; City; State; Zip Code LOS GATOS, CA 95031	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3079/4629 Rpt: 3082/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code LOS GATOS, CA 95031	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HIGIER ALLEN & LAUTIN, PC
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HIGIER ALLEN & LAUTIN, PC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, JON <hr/> Contributor address; City; State; Zip Code FRANKLIN, TN 37067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) DOMINICAN CAMPUS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, JULIE <hr/> Contributor address; City; State; Zip Code ROANOKE, VA 24018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3080/4629 Rpt: 3083/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWEN, MIKE <hr/> 6 Contributor address; City; State; Zip Code LYNNWOOD, WA 98036-9047	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, ARTHUR MICHAEL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, ARTHUR MICHAEL <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, BONITA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) AWN LEADERSHIP CONSULTING
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, JOANNE <hr/> Contributor address; City; State; Zip Code MISSION, KS 66202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) COMMUNITY LINC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3081/4629 Rpt: 3084/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, LEIGH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AZLE, TX 76020		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWENS, LEIGH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AZLE, TX 76020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWSLEY, JAMES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GREENVILLE, TX 75402		
Principal occupation / Job title (See Instructions) ADJUNCT		Employer (See Instructions) PARIS JUNIORCOLLEGE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWSLEY, JAMES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code GREENVILLE, TX 75402		
Principal occupation / Job title (See Instructions) ADJUNCT		Employer (See Instructions) PARIS JUNIORCOLLEGE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWSLEY, JAMES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code GREENVILLE, TX 75402		
Principal occupation / Job title (See Instructions) ADJUNCT		Employer (See Instructions) PARIS JUNIORCOLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3082/4629 Rpt: 3085/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWSLEY, JAMES <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75402	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ADJUNCT		9 Employer (See Instructions) PARIS JUNIORCOLLEGE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWSLEY, JAMES <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ADJUNCT		Employer (See Instructions) PARIS JUNIORCOLLEGE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWSLEY, JAMES <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ADJUNCT		Employer (See Instructions) PARIS JUNIORCOLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWUOR, NAOMI <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RECEPTIONIST		Employer (See Instructions) THE LASH LOUNGE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OWUOR, NAOMI <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RECEPTIONIST		Employer (See Instructions) THE LASH LOUNGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3083/4629 Rpt: 3086/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OZANICH, EVELYN <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OZANICH, EVELYN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OZIER MORRISON, STEFANI <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) L&D MANAGER		Employer (See Instructions) CRH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) P BOUFFARD, MAURICE <hr/> Contributor address; City; State; Zip Code SAINT JOHNSBURY, VT 05819	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, BLACK AMERICAN FUTURES <hr/> Contributor address; City; State; Zip Code DECATUR, GA 30032	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PAC		Employer (See Instructions) BLACK AMERICAN FUTURES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3084/4629 Rpt: 3087/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, JUST <hr/> 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) JUST		9 Employer (See Instructions) PAC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, JUST <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) JUST		Employer (See Instructions) PAC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, JUST <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) JUST		Employer (See Instructions) PAC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, JUST <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) JUST		Employer (See Instructions) PAC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, LEGACY 44 <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3085/4629 Rpt: 3088/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC, TEXAS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78705	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) TREASURER		9 Employer (See Instructions) TEXAS OPTOMETRIC PAC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACACHA, RONALD <hr/> Contributor address; City; State; Zip Code DELRAY BEACH, FL 33446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MUNICIPAL LAWYER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACCHIANA, ADAM <hr/> Contributor address; City; State; Zip Code SANDY HOOK, CT 06482	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACCHIANA, ADAM <hr/> Contributor address; City; State; Zip Code SANDY HOOK, CT 06482	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, AMY <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3086/4629 Rpt: 3089/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, AMY <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77429	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, AMY <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, CAROL <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, CAROL <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, NATALIE <hr/> Contributor address; City; State; Zip Code SAN RAFAEL, CA 94903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SR MARKETING SPECIALIST		Employer (See Instructions) COMPASS GROUP USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3087/4629 Rpt: 3090/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, ALFONSO <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GOVERNMENT RELATIONS		9 Employer (See Instructions) AMHERST GROUP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, DANIEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STRATEGIC ACCOUNT MANAGER		Employer (See Instructions) BD (BECTON DICKINSON)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, DANIEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STRATEGIC ACCOUNT MANAGER		Employer (See Instructions) BD (BECTON DICKINSON)
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, MARIA <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) GOOGLE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, MARIA <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) GOOGLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3088/4629 Rpt: 3091/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, MARIA <hr/> 6 Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TECHNOLOGY		9 Employer (See Instructions) GOOGLE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, MARIA <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) GOOGLE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACHECO, VANESSA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) OHANA COTTONWOOD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACIULLO, PHYLLIS <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11211	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACKER, PHILIP <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3089/4629 Rpt: 3092/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACKER, PHILIP <hr/> 6 Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, CARLY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CORPORATE		Employer (See Instructions) BUCEES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, LORETTA <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, LORETTA <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADILLA, GEORGE <hr/> Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3090/4629 Rpt: 3093/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADILLA, JOSE <hr/> 6 Contributor address; City; State; Zip Code MIDLAND, TX 79705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADILLA, JOSE <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, ALLISON <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, ALLISON <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97405	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, ELAINE <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETAIL		Employer (See Instructions) T.J.F. FOUNDATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3091/4629 Rpt: 3094/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, PRUDENCE <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, RITA AND JOHNNY <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, RITA AND JOHNNY <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAIGE, REGINALD <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PATIO DESIGNER		Employer (See Instructions) CLAYDOT GROUP LLC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINE, LINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3092/4629 Rpt: 3095/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAJAC, LORY <hr/> 6 Contributor address; City; State; Zip Code GRANTSBURG, WI 54840	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALCEWSKI, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALCEWSKI, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALCEWSKI, BARBARA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALEN, FRANK <hr/> Contributor address; City; State; Zip Code LAKE WORTH, FL 33460	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CALDWELL PACETTI ET AL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3093/4629 Rpt: 3096/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALENCIA, APRIL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93110		
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) VANGUARD PLANNING
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALKA, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MAPLE GROVE, MN 55369		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALKA, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MAPLE GROVE, MN 55369		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN	Amount of Contribution (\$) \$9.00
Contributor address; City; State; Zip Code GILROY, CA 95020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GILROY, CA 95020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3094/4629 Rpt: 3097/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> 6 Contributor address; City; State; Zip Code GILROY, CA 95020	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3095/4629 Rpt: 3098/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> 6 Contributor address; City; State; Zip Code GILROY, CA 95020	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3096/4629 Rpt: 3099/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> 6 Contributor address; City; State; Zip Code GILROY, CA 95020	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, ALLEN <hr/> Contributor address; City; State; Zip Code GILROY, CA 95020	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, DUANE <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308-2464	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3097/4629 Rpt: 3100/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, DUANE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308-2464		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, DUANE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308-2464		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, KERI	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code CYPRESS, TX 77433		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HCA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, MARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78744		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, MICHELLE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77063-4234		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALDINE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3098/4629 Rpt: 3101/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77063	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HOUSTON ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) GREENHILL SCHOOL
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) GREENHILL SCHOOL
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) GREENHILL SCHOOL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, THERESE <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3099/4629 Rpt: 3102/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, THERESE <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALMER, TRICIA <hr/> Contributor address; City; State; Zip Code PALMETTO, FL 34221	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALONE, ANNE <hr/> Contributor address; City; State; Zip Code FINEVIEW, NY 13640	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALOS, MARTA <hr/> Contributor address; City; State; Zip Code WHITTIER, CA 90604	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HR MANAGER		Employer (See Instructions) MITCHELL LABS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALUMBO, PAMELA <hr/> Contributor address; City; State; Zip Code LAKE CLEAR, NY 12945	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3100/4629 Rpt: 3103/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PALUMBO, PAMELA <hr/> 6 Contributor address; City; State; Zip Code LAKE CLEAR, NY 12945	7 Amount of Contribution (\$) \$1.43
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAN, MICHAEL <hr/> Contributor address; City; State; Zip Code OAKTON, VA 22124	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NURSING ASSISTANT		Employer (See Instructions) THE VETERANS HEALTH ADMINSTRATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANAGOS, KALLY <hr/> Contributor address; City; State; Zip Code NORTH POTOMAC, MD 20878	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANDOLFI, ALFRED <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANEPINTO, PAUL <hr/> Contributor address; City; State; Zip Code WOODBRIIDGE TOWNSHIP, NJ 07095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3101/4629 Rpt: 3104/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANG, NAOMI <hr/> 6 Contributor address; City; State; Zip Code MILILANI, HI 96789	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANJWANI, M K <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTALION, ALESE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LEGAL OPERATIONS MANAGER		Employer (See Instructions) CRITICAL START, INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTALION, ALESE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LEGAL OPERATIONS MANAGER		Employer (See Instructions) CRITICAL START, INC.
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTALION, ALESE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LEGAL OPERATIONS MANAGER		Employer (See Instructions) CRITICAL START, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3102/4629 Rpt: 3105/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTALION, ALESE <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) LEGAL OPERATIONS MANAGER		9 Employer (See Instructions) CRITICAL START, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTZER, JOHN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SKYWIRE DESIGN INC
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTZER, JOHN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SKYWIRE DESIGN INC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTZER, JOHN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081-5480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES ENGINEER		Employer (See Instructions) GENERAL DYNAMICS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTZER, JOHN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081-5480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES ENGINEER		Employer (See Instructions) GENERAL DYNAMICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3103/4629 Rpt: 3106/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTZER, JOHN <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) SKYWIRE DESIGN INC
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANTZER, JOHN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081-5480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES ENGINEER		Employer (See Instructions) GENERAL DYNAMICS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANZARELLA, JOSEPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) ORSTED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANZER, MEG PANZER <hr/> Contributor address; City; State; Zip Code PHOENIX, AZ 85007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAO, JULIET <hr/> Contributor address; City; State; Zip Code WILLIAMSBURG, VA 23185-8929	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3104/4629 Rpt: 3107/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPADIMATOS, TAMI	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code OLD BETHPAGE, NY 11804		
8 Principal occupation / Job title (See Instructions) SPEECH LANGUAGE PATHOLOGIST		9 Employer (See Instructions) FEDCAP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPLIN, CATHERINE	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code BROOKLYN, NY 11209		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) STEVEN WINTER ASSOCIATES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, CASEY	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, CASEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, CASEY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) TEXAS A&M UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3105/4629 Rpt: 3108/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, CASEY <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ASTRONOMER		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, CASEY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, CASEY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, MAUREEN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SINGER/VOICE TEACHER		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPOVICH, MAUREEN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SINGER/VOICE TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3106/4629 Rpt: 3109/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPPALARDO, BRIAN <hr/> 6 Contributor address; City; State; Zip Code LITTLE ROCK, AR 72202	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) PAPPALARDO MEDIA CO
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAPPALARDO, BRIAN <hr/> Contributor address; City; State; Zip Code LITTLE ROCK, AR 72202	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) PAPPALARDO MEDIA CO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARCHEM, ANN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARCHEM, ANN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARDUE, LESLIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3107/4629 Rpt: 3110/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARDUE, LESLIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) JOHNSON AND JOHNSON ATTORNEYS AT LAW
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3108/4629 Rpt: 3111/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77019		
8 Principal occupation / Job title (See Instructions) PUBLISHER		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAREKH, ERIN	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) PUBLISHER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARENT, JEFF	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KATY, TX 77494		
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) TOYOTA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3109/4629 Rpt: 3112/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARENT, JEFF <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77494	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) TOYOTA
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARENT, MARY <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARIS, HOWARD <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARIS, HOWARD <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARK, J ALANE <hr/> Contributor address; City; State; Zip Code TAKOMA PARK, MD 20912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) JSSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3110/4629 Rpt: 3113/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARK, PATTY <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76201	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARK, PATTY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKEN, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, ANNISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77266	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) LGBTQ VICTORY FUND
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, BLAIR <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3111/4629 Rpt: 3114/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, Bruce <hr/> 6 Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33435	7 Amount of Contribution (\$) \$5,024.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, CHRYSTAL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SDMC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, CHRYSTAL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) SDMC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, D.C., BRUCE <hr/> Contributor address; City; State; Zip Code MALIBU, CA 90265	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHIROPRACTOR		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) LONGBOW PARTNERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3112/4629 Rpt: 3115/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, ERIC <hr/> 6 Contributor address; City; State; Zip Code FRESNO, TX 77545	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DRIVER		9 Employer (See Instructions) FEDEX FREIGHT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, GARY <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, JANICE <hr/> Contributor address; City; State; Zip Code DUBLIN, TX 76446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, JANICE <hr/> Contributor address; City; State; Zip Code DUBLIN, TX 76446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, JEREMIAH <hr/> Contributor address; City; State; Zip Code CROZET, VA 22932	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MORGAN, LEWIS & BOCKIUS LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3113/4629 Rpt: 3116/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, KARROLL	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76103-1915		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, LANCE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) HEALTHCARE LEADERSHIP		Employer (See Instructions) FCC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, LANCE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) HEALTHCARE LEADERSHIP		Employer (See Instructions) FCC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, MADISON	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78728		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, PATRICIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3114/4629 Rpt: 3117/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, RITA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, TIMOTHY <hr/> Contributor address; City; State; Zip Code EVANS, GA 30809	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, TIMOTHY <hr/> Contributor address; City; State; Zip Code EVANS, GA 30809	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, VICKIE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INDEPENDENT CONTRACTOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3115/4629 Rpt: 3118/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, VICKIE <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75082	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		9 Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, VICKIE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INDEPENDENT CONTRACTOR		Employer (See Instructions) SELF EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, VICKIE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, WILLIAM <hr/> Contributor address; City; State; Zip Code TROY, MO 63379	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, WILLIAM <hr/> Contributor address; City; State; Zip Code TROY, MO 63379	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3116/4629 Rpt: 3119/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER BRIGHT, CHANTEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75229	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) DESIGN CONSULTANT		9 Employer (See Instructions) PARKER BRIGHT LLC
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKS, MICHAEL <hr/> Contributor address; City; State; Zip Code GALVESTON, VA 77551	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKS, TONYA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) TONYA PARKS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARMAR, HARISH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARMAR, HARISH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3117/4629 Rpt: 3120/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, JAMES <hr/> 6 Contributor address; City; State; Zip Code BLOOMINGTON, IL 61701	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, JAMES <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, IL 61701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, JERRY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CATALYST
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, JERRY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CATALYST
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRA, BEATRIZ <hr/> Contributor address; City; State; Zip Code RIVER OAKS, TX 76114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3118/4629 Rpt: 3121/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRA, BEATRIZ <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRA, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRA, NANCY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRISH, LINDA <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRISH, LINDA <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3119/4629 Rpt: 3122/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRISH, LINDA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRISH, LINDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARROTT, CHARLOTTE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSLEY, BEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSLOW, MARGARET	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3120/4629 Rpt: 3123/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSLOW, MARGARET <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSONS, LESLIE <hr/> Contributor address; City; State; Zip Code DAYTON, OH 45449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSONS, PAT <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSONS, PAT <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSONS, STUART <hr/> Contributor address; City; State; Zip Code WACO, TX 76705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) PARSONS ROOFING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3121/4629 Rpt: 3124/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARTEN, DONNA <hr/> 6 Contributor address; City; State; Zip Code SACRAMENTO, CA 95820	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARVEY, MARLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARVEY, MARLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARVEY, MARLA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASCAL, MATT <hr/> Contributor address; City; State; Zip Code HUDSON, CO 80642	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PACE-O-MATIC SKILL GAME VENDOR		Employer (See Instructions) REPUBLIC AMUSEMENTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3122/4629 Rpt: 3125/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASHOTE, KATHY <hr/> 6 Contributor address; City; State; Zip Code LIVERMORE, CA 94550	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASS, EMILIE <hr/> Contributor address; City; State; Zip Code NEWBURGH, NY 12550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASSALACQUA, KAREN <hr/> Contributor address; City; State; Zip Code GLEN COVE, NY 11542	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) YOGA TEACHER		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASTIN, SUSAN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626-2656	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASTIN, SUSAN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626-2656	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3123/4629 Rpt: 3126/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASTNER, REBECCA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78722	7 Amount of Contribution (\$) \$63.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASTRANA, JOSE <hr/> Contributor address; City; State; Zip Code LUMBERTON, TX 77657	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASTRANA, JOSE <hr/> Contributor address; City; State; Zip Code LUMBERTON, TX 77657	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PASZTOR, PATRICIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) NATURAL RESOURCE/BOTANICAL CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATE, SHEILA <hr/> Contributor address; City; State; Zip Code LAURINBURG, NC 28352	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3124/4629 Rpt: 3127/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATE, SHEILA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LAURINBURG, NC 28352		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEL, KANTI	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95132-2224		
Principal occupation / Job title (See Instructions) RETIRED CIVIL ENGINEER		Employer (See Instructions) RETIRED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEL, KANTI	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95132-2224		
Principal occupation / Job title (See Instructions) RETIRED CIVIL ENGINEER		Employer (See Instructions) RETIRED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEL, KULDEEP	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77498		
Principal occupation / Job title (See Instructions) HOTELIER		Employer (See Instructions) KULDEEP PATEL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEL, MAMTA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CHICAGO, IL 60642		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) DISCOVER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3125/4629 Rpt: 3128/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEL, PREMILA <hr/> 6 Contributor address; City; State; Zip Code CHATTANOOGA, TN 37421	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATERSON, EVA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEY, GRETCHEN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WAITSTAFF		Employer (See Instructions) MONONA CATERING
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATEY, GRETCHEN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53701	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) WAITSTAFF		Employer (See Instructions) MONONA CATERING
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATIL, SHREE <hr/> Contributor address; City; State; Zip Code WESTFORD, MA 01886	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RED HAT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3126/4629 Rpt: 3129/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATINO, KRYSTAL	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code THE COLONY, TX 75056-2162		
8 Principal occupation / Job title (See Instructions) SUPERVISOR		9 Employer (See Instructions) BAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATINO, KRYSTAL	Amount of Contribution (\$) \$10.70
Contributor address; City; State; Zip Code THE COLONY, TX 75056-2162		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, AMELIA	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code SPRING, TX 77373		
Principal occupation / Job title (See Instructions) STRUCTURAL ENGINEER		Employer (See Instructions) APOLLO BBC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) BHOJANI LAW, PLLC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) BHOJANI LAW, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3127/4629 Rpt: 3130/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code EULESS, TX 76039		
8 Principal occupation / Job title (See Instructions) BUSINESS MANAGER		9 Employer (See Instructions) BHOJANI LAW, PLLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) BHOJANI LAW PLLC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) BHOJANI LAW PLLC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) BHOJANI LAW PLLC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) BUSINESS MANAGER		Employer (See Instructions) BHOJANI LAW PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3128/4629 Rpt: 3131/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, BRIAN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code EULESS, TX 76039		
8 Principal occupation / Job title (See Instructions) BUSINESS MANAGER		9 Employer (See Instructions) BHOJANI LAW PLLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3129/4629 Rpt: 3132/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY <hr/> Contributor address; City; State; Zip Code EULESS TX, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3130/4629 Rpt: 3133/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, CATHY <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, KATRINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79923	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3131/4629 Rpt: 3134/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA	7 Amount of Contribution (\$) \$105.00
6 Contributor address; City; State; Zip Code BULVERDE, TX 78163		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code BULVERDE, TX 78163		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA	Amount of Contribution (\$) \$21.00
Contributor address; City; State; Zip Code BULVERDE, TX 78163		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BULVERDE, TX 78163		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BULVERDE, TX 78163		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3132/4629 Rpt: 3135/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA <hr/> 6 Contributor address; City; State; Zip Code BULVERDE, TX 78163	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICK, TERESA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3133/4629 Rpt: 3136/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATRICOLA, JIM <hr/> 6 Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, BILLIE G <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, BILLIE G <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, BILLIE G <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, BILLIE G <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3134/4629 Rpt: 3137/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, BILLIE G <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, DAVID <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LITERARY AGENT		Employer (See Instructions) SKLA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, DAVID <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LITERARY AGENT		Employer (See Instructions) SKLA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, HANSELL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, HANSELL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORK		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3135/4629 Rpt: 3138/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JAMES <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75252	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SPENCER FANE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JAMES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SPENCER FANE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> 6 Contributor address; City; State; Zip Code LEXINGTON, KY 40511	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3137/4629 Rpt: 3140/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> 6 Contributor address; City; State; Zip Code LEXINGTON, KY 40511	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JOHN <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JUDITH <hr/> Contributor address; City; State; Zip Code SOMERDALE, NJ 08083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, JUDITH <hr/> Contributor address; City; State; Zip Code SOMERDALE, NJ 08083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, LYNNE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AWARD SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3138/4629 Rpt: 3141/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, LYNNE <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) AWARD SOLUTIONS
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, LYNNE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) AWARD SOLUTIONS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTERSON, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77277	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ASSISTANT DISTRICT ATTORNEY		Employer (See Instructions) HARRIS COUNTY DISTRICT ATTORNEY'S OFFICE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTILLO, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) GENERAL COUNSEL		Employer (See Instructions) AVECMODE LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTON, JO <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3139/4629 Rpt: 3142/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PATTON, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77433	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) MPCE, LLC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL, HARRIET <hr/> Contributor address; City; State; Zip Code PLEASANTON, TX 78064	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL, HARRIET <hr/> Contributor address; City; State; Zip Code PLEASANTON, TX 78064	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL, HARRIET <hr/> Contributor address; City; State; Zip Code PLEASANTON, TX 78064	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAUL, MARY ANNA <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87501	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3140/4629 Rpt: 3143/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAULIUS, LISA <hr/> 6 Contributor address; City; State; Zip Code KALAMAZOO, MI 49008	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) WMU
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAULL, EVAN <hr/> Contributor address; City; State; Zip Code MAPLEWOOD, NJ 07040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) SCHRODINGER
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAULOSKI, GWEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAULSEL, JEAN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAULSON, ALISON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REGISTERED DIETITIAN		Employer (See Instructions) DAVITA DIALYSIS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3141/4629 Rpt: 3144/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVELKO, IAN <hr/> 6 Contributor address; City; State; Zip Code MADISON, WI 53704	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) BUDGET TECHNICIAN		9 Employer (See Instructions) USGS UPPER MIDWEST WATER SCIENCE CENTER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVELKO, IAN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53704	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) BUDGET TECHNICIAN		Employer (See Instructions) USGS UPPER MIDWEST WATER SCIENCE CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVELKO, IAN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53704	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) BUDGET TECHNICIAN		Employer (See Instructions) USGS UPPER MIDWEST WATER SCIENCE CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVLOVICH, VALERIE <hr/> Contributor address; City; State; Zip Code SILVIS, IL 61282-1025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAVLOVICH, VALERIE <hr/> Contributor address; City; State; Zip Code SILVIS, IL 61282-1025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3142/4629 Rpt: 3145/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAWENSKI, JOELYN <hr/> 6 Contributor address; City; State; Zip Code CANTON, MI 48187	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAXTON, CHERYL <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98684	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYAN, DIANA <hr/> Contributor address; City; State; Zip Code SUN CITY, AZ 85351	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, BARKLEY <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85255	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) IIO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, BRITT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ESCROW OFFICER		Employer (See Instructions) BENCHMARK TITLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3143/4629 Rpt: 3146/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, DOUG <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, DOUGLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) MASTER PLANNER		Employer (See Instructions) LOCKHEED MARTIN
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, DREW <hr/> Contributor address; City; State; Zip Code WOLFFORTH, TX 79382	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TTUHSC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, LYNN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, LYNN <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3144/4629 Rpt: 3147/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, LYNN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3145/4629 Rpt: 3148/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3146/4629 Rpt: 3149/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYSSE, EVELYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYSSE, EVELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYSSE, EVELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYSSE, EVELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYSSE, EVELYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3147/4629 Rpt: 3150/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYTON-ROSS, CHARLOTTE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYTON-ROSS, CHARLOTTE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYTON-ROSS, CHARLOTTE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYTON-ROSS, CHARLOTTE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAZ, JAVIER <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) EL PASO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3148/4629 Rpt: 3151/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAZ, JAVIER <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79932	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) EPISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAZ-JACOBS, ROSA <hr/> Contributor address; City; State; Zip Code HAIKU, HI 96708	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEAKE, KAREN <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEAKE, KAREN <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEAKE, SANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3149/4629 Rpt: 3152/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEAKE, SANDRA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77071	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARCE, GAYLA <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARL, DEBORAH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF-EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, MARY <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOME, AR 72653	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, PAMELA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3150/4629 Rpt: 3153/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, PAMELA	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78702		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, PAMELA	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, PAMELA	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, SHAKEEL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) MAINTENANCE SUPERVISOR		Employer (See Instructions) PEPSICO
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, SHARI	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) STRATUS PROPERTIES INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3151/4629 Rpt: 3154/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, SHARON <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79936	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, SHARON <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECHACEK, ROBERT <hr/> Contributor address; City; State; Zip Code MILLS RIVER, NC 28759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) CRMG
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, GLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SR DIRECTOR DIGITAL COMMUNICATIONS		Employer (See Instructions) SUSAN G KOMEN - GREATER NYC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, GLEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SR DIRECTOR DIGITAL COMMUNICATIONS		Employer (See Instructions) SUSAN G KOMEN - GREATER NYC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3152/4629 Rpt: 3155/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, HELEN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DENVER, CO 80247		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, HELEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENVER, CO 80247		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, KAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, KAREN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, KAREN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3153/4629 Rpt: 3156/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, KAREN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECK, SUSAN <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PECKHAM, MICHAL ELAINE <hr/> Contributor address; City; State; Zip Code GLENDALE, AZ 85308	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDERSEN, BILL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) JUSTICE		Employer (See Instructions) FIFTH COURT OF APPEALS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDROZA, ELISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) COUNTER TOPS PLUS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3154/4629 Rpt: 3157/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDUZZI, MARTIN <hr/> 6 Contributor address; City; State; Zip Code BEAVER, PA 15009	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEDUZZI, MARTIN <hr/> Contributor address; City; State; Zip Code BEAVER, PA 15009	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEBLES, KAY <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN MGR		Employer (See Instructions) ENTEGRIS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEBLES, KAY <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN MGR		Employer (See Instructions) ENTEGRIS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEK, GAIL <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BEARD KULTGEN ET AL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3155/4629 Rpt: 3158/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEL, EMILY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code NORTH PORT, FL 34287		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEL, EMILY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NORTH PORT, FL 34287		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEL, EMILY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code NORTH PORT, FL 34287		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEL, EMILY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NORTH PORT, FL 34287		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEPLES, ROBIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code TEMPLE, TX 76501		
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3156/4629 Rpt: 3159/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEEPLES, ROBIN <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76501	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TECH		9 Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEGODA, DENISE <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEGODA, DENISE <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEGODA, DENISE LAMB <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEGODA, DENISE LAMB <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3157/4629 Rpt: 3160/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEGUERO, ANTONIO <hr/> 6 Contributor address; City; State; Zip Code RENTON, WA 98058	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEI, SHIN-SHEM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) PROFESSOR EMERITUS		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEI, SHIN-SHEM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PROFESSOR EMERITUS		Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEIPERT, KATHY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEIPERT, KATHY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3158/4629 Rpt: 3161/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEIPERT, KATHY <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEIPERT, KATHY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEISEN, LISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) L&F
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEISSEL, CHARLES <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELAEZ, JUAN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) DELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3159/4629 Rpt: 3162/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELC, ROBERT <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-1811	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELC, ROBERT <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-1811	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELHAM, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CRS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3160/4629 Rpt: 3163/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78717		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELOSI, JAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3161/4629 Rpt: 3164/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PELZEL, MADELEINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PLANNER		9 Employer (See Instructions) HUITT-ZOLLARS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENA, FABIAN <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852-3882	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GEOSCIENTIST		Employer (See Instructions) MICROSEISMIC INC
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENA, JORGE <hr/> Contributor address; City; State; Zip Code WISCASSET, ME 04578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENA, JOSE F <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DONNA MEDICAL CLINIC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENA, JOSE F <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) DONNA MEDICAL CLINIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3162/4629 Rpt: 3165/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENA-ALFARO, VALERIE <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, TX 75007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENCE, CLYDE <hr/> Contributor address; City; State; Zip Code FRANKLIN, TN 37069-6516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENDERGRAFT, TARA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MST		Employer (See Instructions) LOWES
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENDLAND, GRACE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENDLETON, ALFRED <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ADVERTISING		Employer (See Instructions) SILTANEN & PARTNERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3163/4629 Rpt: 3166/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENDLETON, MARY <hr/> 6 Contributor address; City; State; Zip Code PACIFICA, CA 94044	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MARKETING MANAGER		9 Employer (See Instructions) MMHMM, INC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENFIELD, JANINE <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENFIELD, JANINE <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENFIELD, JANINE <hr/> Contributor address; City; State; Zip Code CONCORD, MA 01742	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENG, ELAINE <hr/> Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94546	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) MENTAL HEALTH SITUATION FOR CHINESE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3164/4629 Rpt: 3167/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENICHE, CARLOS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77025	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) PENICHE LAW FIRM PC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENICHE, CARLOS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PENICHE LAW FIRM PC
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENICHE, CARLOS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PENICHE LAW FIRM PC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENICK, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENICK, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3165/4629 Rpt: 3168/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENICK, CAROL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) AUSTIN ISD
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENN, RANDY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENNINGTON, GLORIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PENNINGTON, JANICE <hr/> Contributor address; City; State; Zip Code JOSHUA, TX 76058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEOPLES, TYWANNA <hr/> Contributor address; City; State; Zip Code SPRINGFIELD, TN 37172	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3166/4629 Rpt: 3169/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEPIN, DIANE <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEPPITO, JULIA <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) JULIE PEPPITO
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERALES, CARLOS <hr/> Contributor address; City; State; Zip Code MISSION, TX 78574	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CREW LEADER		Employer (See Instructions) CITY OF MCALLEN
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERDUE, NICOLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PERDUE AND KIDD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERDUE, WENDY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FAMILY ENGAGEMENT LIAISON		Employer (See Instructions) ARLINGTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3167/4629 Rpt: 3170/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREA, ELISA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79935	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) ENTERPRISE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREA, ELISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ENTERPRISE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREA, ELISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ENTERPRISE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREA, JOHNNY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) ADP
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREA, JOHNNY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79935	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) ADP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3168/4629 Rpt: 3171/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREA, JOHNNY <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79935	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) ADP
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREGRINO, SYLVIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) EL PASO COMMUNITY COLLEGE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ALYSSA <hr/> Contributor address; City; State; Zip Code CANUTILLO, TX 79835	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CLEAT
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ALYSSA <hr/> Contributor address; City; State; Zip Code CANUTILLO, TX 79835	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CLEAT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ANGELA <hr/> Contributor address; City; State; Zip Code PHOENIX, AZ 85004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) FRAUSTO

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3169/4629 Rpt: 3172/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ANNA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79927	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, BRENDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN DIRECTOR CLIN OPS		Employer (See Instructions) CORNERSTONE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, BRENDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN DIRECTOR CLIN OPS		Employer (See Instructions) CORNERSTONE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, BRENDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN DIRECTOR CLIN OPS		Employer (See Instructions) CORNERSTONE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, CAROLINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CLINICAL APPLICATIONS SPECIALIST		Employer (See Instructions) GE HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3170/4629 Rpt: 3173/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, DAHLIA <hr/> 6 Contributor address; City; State; Zip Code PHARR, TX 78577	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) OFFICE MANAGER		9 Employer (See Instructions) GUERRA, SCOTT & MOLINA, PLLC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, EDWARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ART ASSISTANT		Employer (See Instructions) PICROW STREAMING - PANIC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, EMERICO <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		Employer (See Instructions) STATE OF TEXAS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, LINDA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) EL PASO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3171/4629 Rpt: 3174/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, LINDA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) EL PASO COUNTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, LINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) ACADEMIC DEAN		Employer (See Instructions) HARLANDALE ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, MARCO <hr/> Contributor address; City; State; Zip Code DEKALB, IL 60115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ROOFING		Employer (See Instructions) GREENSHIELD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, MARCO <hr/> Contributor address; City; State; Zip Code DEKALB, IL 60115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ROOFING		Employer (See Instructions) GREENSHIELD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, MIRIAM <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3172/4629 Rpt: 3175/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, NADINE <hr/> 6 Contributor address; City; State; Zip Code MANSFIELD, TX 76063	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) IRVING ISD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEREZ, NOLAN <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TEXAS DIGESTIVE SPECIALISTS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, DAN <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, DAN <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, KATHY <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27713	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3173/4629 Rpt: 3176/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, LINDA	7 Amount of Contribution (\$) \$55.00
6 Contributor address; City; State; Zip Code ABILENE, TX 79602		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ABILENEISD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, LINDA	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code ABILENE, TX 79602		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ABILENEISD
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, LINDA	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code ABILENE, TX 79602		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ABILENEISD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, REBECCA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) BOOK SELLER		Employer (See Instructions) FREEMAN BOOKSTORE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, REBECCA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CCISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3174/4629 Rpt: 3177/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, REBECCA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BOOK SELLER		9 Employer (See Instructions) FREEMAN BOOKSTORE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKINS, VICKI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKISON, BILL <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKISON, PATRICIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKISON, PATRICIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3175/4629 Rpt: 3178/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKISON, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKOSKI, EVAN <hr/> Contributor address; City; State; Zip Code MANCHESTER, CT 06040-4550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF CONNECTICUT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERLMAN, LEE <hr/> Contributor address; City; State; Zip Code CARLISLE, MA 01741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) M.I.T.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRENOD, WILLIAM <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONPROFIT BUSINESS CONSULTANT		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRENOD, WILLIAM <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONPROFIT BUSINESS CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3176/4629 Rpt: 3179/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRENOD, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code NEW ORLEANS, LA 70117	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NONPROFIT BUSINESS CONSULTANT		9 Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRENOD, WILLIAM <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONPROFIT BUSINESS CONSULTANT		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRENOD, WILLIAM <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONPROFIT BUSINESS CONSULTANT		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRENOD, WILLIAM <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONPROFIT BUSINESS CONSULTANT		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRI, DOROTHY <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3177/4629 Rpt: 3180/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRI, DOROTHY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BASTROP, TX 78602		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRI, SHANNON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF / CHRIS PERRI LAW
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERROT, JEANNINE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, ANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRANKLIN, TX 77856		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, DERRICK	Amount of Contribution (\$) \$54.00
Contributor address; City; State; Zip Code LYTLE, TX 78052		
Principal occupation / Job title (See Instructions) PTA		Employer (See Instructions) VA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3178/4629 Rpt: 3181/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, JEFF <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90067	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ACTOR/TEACHER		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, JESSICA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) APPLE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, JESSICA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) APPLE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, KATHERINE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) CYTIVA
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, KATHERINE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) CYTIVA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3179/4629 Rpt: 3182/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, MARY <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, MARY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, ROBIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, ROBIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, ROBIN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3180/4629 Rpt: 3183/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSHING, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code SAN LEANDRO, CA 94577	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSKY, RONNIE <hr/> Contributor address; City; State; Zip Code BARTLETT, TX 76511	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSKY, RONNIE <hr/> Contributor address; City; State; Zip Code BARTLETT, TX 76511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSON, MARIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSON, MARIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) UT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3181/4629 Rpt: 3184/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSON, MARIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) UT AUSTIN
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERSON, MATTHEW <hr/> Contributor address; City; State; Zip Code FALMOUTH, MA 02541	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) MARINE BIOLOGICAL LABORATORY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERUCHINI, JERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		Employer (See Instructions) DELOITTE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERVIER, STEPHEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERVIER, STEPHEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3182/4629 Rpt: 3185/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PESSNER, KIRK <hr/> 6 Contributor address; City; State; Zip Code BURLINGAME, CA 94010	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SENIOR PARALEGAL		9 Employer (See Instructions) LAW OFFICE OF RUSSELL H. MILLER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PESSNER, KIRK <hr/> Contributor address; City; State; Zip Code BURLINGAME, CA 94010	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SENIOR PARALEGAL		Employer (See Instructions) LAW OFFICE OF RUSSELL H. MILLER
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETER, MARY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERFREUND, JAY <hr/> Contributor address; City; State; Zip Code LAKE WORTH, FL 33467	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, ALLEN <hr/> Contributor address; City; State; Zip Code EL SEGUNDO, CA 90245	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) M.D.		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3183/4629 Rpt: 3186/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, BEVERLY <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75043	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, BEVERLY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GARY <hr/> Contributor address; City; State; Zip Code CHEYENNE, WY 82003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SCHOOL CUSTODIAN		Employer (See Instructions) LCSD#1,CHEY. WY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GENE <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FRCSW
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GENE <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FRCSW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3184/4629 Rpt: 3187/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GENE <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) FRCSW
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GENE <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FRCSW
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GENE <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FRCSW
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, GENE <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92128	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FRCSW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, HANNAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) WE COMMUNICATIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3185/4629 Rpt: 3188/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, HANNAH	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78757		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) WE COMMUNICATIONS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, HANNAH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) WE COMMUNICATIONS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, J GARRY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, JAMES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WEST CHESTER, PA 19380		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) ARDMORE ANIMAL HOSPITAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, JAMES	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WEST CHESTER, PA 19380		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) ARDMORE ANIMAL HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3186/4629 Rpt: 3189/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, LEO	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, MATT	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code TUCSON, AZ 85712-4651		
Principal occupation / Job title (See Instructions) SENIOR PROGRAM MANAGER		Employer (See Instructions) UNIVERSITY OF ARIZONA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, RAYMOND	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code KELLER, TX 76248-1112		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, ROSELLE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CHICO, CA 95926		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, SHEILA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) NURSE ANESTHETIST		Employer (See Instructions) U

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3187/4629 Rpt: 3190/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code SAN RAFAEL, CA 94901	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSEN, ALBERT <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSEN, KERRY <hr/> Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) FALCON EVENTS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSEN, KERRY <hr/> Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) FALCON EVENTS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSEN, TODD <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98126	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3188/4629 Rpt: 3191/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, BECKY <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) BECKY PETERSON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, BEN <hr/> Contributor address; City; State; Zip Code WALTHAM, MA 02452	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) ARTICULATE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, CHRIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ACOUSTICIAN		Employer (See Instructions) COMPUTER COMPANY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, CHRIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) ACOUSTICIAN		Employer (See Instructions) COMPUTER COMPANY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, DOUG <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3189/4629 Rpt: 3192/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, DOUGLAS	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77062		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, ERIC	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code RICHMOND, CA 94804		
Principal occupation / Job title (See Instructions) EDUCATIONAL ADMINISTRATOR		Employer (See Instructions) WEST CONTRA COSTA UNIFIED SCHOOL DISTRICT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, HOPE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77027		
Principal occupation / Job title (See Instructions) TEACHER/THERAPIST		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, JOSHUA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75057		
Principal occupation / Job title (See Instructions) CASH LOGISTICS		Employer (See Instructions) BRINKS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, JOSHUA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LEWISVILLE, TX 75057		
Principal occupation / Job title (See Instructions) CASH LOGISTICS		Employer (See Instructions) BRINKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3190/4629 Rpt: 3193/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, LAUREN <hr/> 6 Contributor address; City; State; Zip Code ST AUGUSTINE, FL 32086	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OR DONOR RELATIONS		9 Employer (See Instructions) ST. AUGUSTINE YOUTH SERVICES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, LAUREN <hr/> Contributor address; City; State; Zip Code ST AUGUSTINE, FL 32086	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR OR DONOR RELATIONS		Employer (See Instructions) ST. AUGUSTINE YOUTH SERVICES
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, LINDA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, MARIEL <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3191/4629 Rpt: 3194/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, MARY S <hr/> 6 Contributor address; City; State; Zip Code AMHERST, MA 01002	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, RAYMOND <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10301	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETITT-MILNES, CAROL <hr/> Contributor address; City; State; Zip Code SOUTH PLYMOUTH, NY 13844	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRASSO, RICHARD <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) MIT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRASSO, RICHARD <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) MIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3192/4629 Rpt: 3195/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETREE, MARCUS <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ASSISTANT		9 Employer (See Instructions) UNIVERSITY OF MISSOURI
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRI, VERNON <hr/> Contributor address; City; State; Zip Code ZIONSVILLE, IN 46077	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRICHOR, EMILY <hr/> Contributor address; City; State; Zip Code CROWNSVILLE, MD 21032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SELF EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRICHOR, EMILY <hr/> Contributor address; City; State; Zip Code CROWNSVILLE, MD 21032	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) HORSE TRAINER		Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRILLI, ELIZABETH <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91105-2448	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AQUATICS INSTRUCTOR		Employer (See Instructions) YMCA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3193/4629 Rpt: 3196/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> 6 Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3194/4629 Rpt: 3197/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> 6 Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETRIZZO, RICHARD <hr/> Contributor address; City; State; Zip Code DAVIS JUNCTION, IL 61020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETROSKY, LORRAINE <hr/> Contributor address; City; State; Zip Code WEXFORD, PA 15090	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTAS, MARY <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60647	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTERSON MCGRAW, LAUREL <hr/> Contributor address; City; State; Zip Code KAPAA, HI 96746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3195/4629 Rpt: 3198/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTINGILL, NANCY	7 Amount of Contribution (\$) \$8.33
6 Contributor address; City; State; Zip Code BOULDER, CO 80304		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTIT, GLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORTLAND, OR 97212-2065		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTIT, GLEN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PORTLAND, OR 97212-2065		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTIT, GLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PORTLAND, OR 97212-2065		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, JACQUELYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3196/4629 Rpt: 3199/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, JACQUELYN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, JANE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90064	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) MUSIC PUBLISHING		Employer (See Instructions) SELF - EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, JIM <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, JIM <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, MELISSA <hr/> Contributor address; City; State; Zip Code HONOLULI, HI 96825	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3197/4629 Rpt: 3200/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, MELISSA <hr/> 6 Contributor address; City; State; Zip Code HONOLULI, HI 96825	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETTY, MELISSA <hr/> Contributor address; City; State; Zip Code HONOLULI, HI 96825	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEUGH, BOBBY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFEIFFER, JAN <hr/> Contributor address; City; State; Zip Code CHERRY HILL, NJ 08003	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFEIFFER, NANCY <hr/> Contributor address; City; State; Zip Code HOSCHTON, GA 30548	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3198/4629 Rpt: 3201/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFEIFFER, NANCY <hr/> 6 Contributor address; City; State; Zip Code HOSCHTON, GA 30548	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFEIL, RICK <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFEIL, RICK <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFIESTER, NANCY <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFIESTER, R E <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90039	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3199/4629 Rpt: 3202/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFIESTER, R E	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90039		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFIESTER, R E	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90039		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFIESTER, R E	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90039		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFLEEGER, JOYCE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PFLEEGER, JOYCE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3200/4629 Rpt: 3203/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHAM, HUYEN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHAM, HUYEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHAM, TONY <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARIS, SHIRLEY <hr/> Contributor address; City; State; Zip Code LITTLE ROCK, AR 72211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARISS, MARK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093-7991	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TENET HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3201/4629 Rpt: 3204/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARISS, MARK <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75093-7991	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TENET HEALTHCARE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARISS, MARK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093-7991	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TENET HEALTHCARE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARISS, MARK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093-7991	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TENET HEALTHCARE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARISS, MARK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093-7991	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TENET HEALTHCARE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHARR, REGINALD <hr/> Contributor address; City; State; Zip Code CONCORD, NC 28025	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) FAITH FELLOWSHIP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3202/4629 Rpt: 3205/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHATAK, VIKRAM	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78734		
8 Principal occupation / Job title (See Instructions) CYBERSECURITY		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHATAK, VIKRAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) CYBERSECURITY		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHATAK, VIKRAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) CYBERSECURITY		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHEASANT, MAGGIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPOKANE, WA 99202		
Principal occupation / Job title (See Instructions) GERIATRIC CARE MANAGER		Employer (See Instructions) MS.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILAMLEE, WHITNEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LITTLE ROCK, AR 72211		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CONWAY REGIONAL MEDICAL CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3203/4629 Rpt: 3206/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILBRICK, SARAH <hr/> 6 Contributor address; City; State; Zip Code LIGONIER, PA 15658	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILEN, JOYCE E. <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILEN, JOYCE E. <hr/> Contributor address; City; State; Zip Code NEDERLAND, TX 77627	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILIPS, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) LOBLOLLY CONSULTING LLC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILIPS, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) LOBLOLLY CONSULTING LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3204/4629 Rpt: 3207/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILIPS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) LOBLOLLY CONSULTING LLC
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILIPS, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) LOBLOLLY CONSULTING LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, CINDY <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, DALE <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, DONNA <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3205/4629 Rpt: 3208/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, DONNA <hr/> 6 Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	7 Amount of Contribution (\$) \$15.60
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, DONNA <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689-2637	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, DONNA <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, DONNA <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ERMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3206/4629 Rpt: 3209/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ISAAC <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DEVELOPER		9 Employer (See Instructions) GRID UNITED LLC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ISAAC <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) GRID UNITED LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, JAMES <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BAKERHOSTETLER
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, JANET <hr/> Contributor address; City; State; Zip Code ROCKLIN, CA 95677	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) JANET PHILLIPS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, JANET <hr/> Contributor address; City; State; Zip Code ROCKLIN, CA 95677	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) JANET PHILLIPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3207/4629 Rpt: 3210/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, MEREDITH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) CISCO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SHELL OIL COMPANY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, STEPHANIE B <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICHEL, GERHARD <hr/> Contributor address; City; State; Zip Code PACIFIC PALISADES, CA 90272	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) RETIRED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICHON, EDWARD <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		Employer (See Instructions) E-QUALUS PARTNERS, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3208/4629 Rpt: 3211/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICHON, EDWARD <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		9 Employer (See Instructions) E-QUALUS PARTNERS, LLC
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICHON, EDWARD <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		Employer (See Instructions) E-QUALUS PARTNERS, LLC
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICHON, EDWARD <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING CONSULTANT		Employer (See Instructions) E-QUALUS PARTNERS, LLC
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICININI, SILVIO <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOUSE, CA 95391	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NLP		Employer (See Instructions) EBAY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICININI, SILVIO <hr/> Contributor address; City; State; Zip Code MOUNTAIN HOUSE, CA 95391	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NLP		Employer (See Instructions) EBAY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3209/4629 Rpt: 3212/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKENS, MARK <hr/> 6 Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKENS, MARK <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKENS, MARK <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKENS, MARK <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKENS, MARK <hr/> Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3210/4629 Rpt: 3213/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKENS, MARK <hr/> 6 Contributor address; City; State; Zip Code ROYAL OAK, MI 48073	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKERING, ED <hr/> Contributor address; City; State; Zip Code ASHLEY, OH 43003	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSTRUCTION EQUIPMENT		Employer (See Instructions) ED PICKERING
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICKETT, MEGHAN <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LOS GATOS SARATOGA UNIFIED HIGH SCHOOL DISTRICT
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PICUCCI, HOLLIE <hr/> Contributor address; City; State; Zip Code SEABROOK, NH 03874	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIECARA, DIANE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) TOUCH OF CLASS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3211/4629 Rpt: 3214/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIEDRAHITA, ALEJANDRO <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76542	7 Amount of Contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) TCESD #2 PFLUGERVILLE ASSOCIATION
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIELA, DIANE <hr/> Contributor address; City; State; Zip Code KAILUA KONA, HI 96740	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIEN, EDWARD <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MEDICAL DOCTOR		Employer (See Instructions) MEDSTAR GEORGETOWN UNIVERSITY HOSPITAL
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIEN, EDWARD <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MEDICAL DOCTOR		Employer (See Instructions) MEDSTAR GEORGETOWN UNIVERSITY HOSPITAL
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIEN, NATALIE <hr/> Contributor address; City; State; Zip Code LEESBURG, VA 20175	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3212/4629 Rpt: 3215/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIEN, NATALIE <hr/> 6 Contributor address; City; State; Zip Code LEESBURG, VA 20175	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, CHRISTINE <hr/> Contributor address; City; State; Zip Code CARBONDALE, CO 81623	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, GREG <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) SELF-EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, GREG <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) SELF-EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, LINDA <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3213/4629 Rpt: 3216/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, LINDA <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, RUTH <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) STEPS TO PROGRESS LLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, YVONNE <hr/> Contributor address; City; State; Zip Code BRONX, NY 10475	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, YVONNE <hr/> Contributor address; City; State; Zip Code BRONX, NY 10475	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERI, LAUREN <hr/> Contributor address; City; State; Zip Code CAMDEN, ME 04843	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN ASSISTANT		Employer (See Instructions) FILDERMAN, MD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3214/4629 Rpt: 3217/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERPONT WILSON, PAM <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, NC 27834	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERRACOS, JON <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040-4211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERRACOS, JON <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040-4211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERSON, PAULA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76006-2739	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERSON, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3215/4629 Rpt: 3218/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERSON, SUSAN <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERSON, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERSON, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660-4609	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERSON, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETEREK, CLAIRE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) CHAT AGENT		Employer (See Instructions) IQOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3216/4629 Rpt: 3219/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETEREK, CLAIRE <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75025	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CHAT AGENT		9 Employer (See Instructions) IQOR
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETEREK, CLAIRE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CHAT AGENT		Employer (See Instructions) IQOR
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETRAZEK, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PIETRAZEK LAW
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETRAZEK, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PIETRAZEK LAW
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETRAZEK, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PIETRAZEK LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3217/4629 Rpt: 3220/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETRAZEK, MARY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) PIETRAZEK LAW
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIETRAZEK, MARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PIETRAZEK LAW
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PILLOW, LAURA <hr/> Contributor address; City; State; Zip Code LANTANA, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIMENTEL, SUSAN <hr/> Contributor address; City; State; Zip Code FORT MYERS, FL 33916	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ED CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINA, RAYMOND <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HEALTHCARE EDUCATION		Employer (See Instructions) CONCORDE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3218/4629 Rpt: 3221/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINCOMBE, ROXANNE <hr/> 6 Contributor address; City; State; Zip Code CASA GRANDE, AZ 85122	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINEDA, ROBERTO <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE PROGRAMMER		Employer (See Instructions) INTUIT
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINEDA, ROBERTO <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE PROGRAMMER		Employer (See Instructions) INTUIT
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINEDA, ROBERTO <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE PROGRAMMER		Employer (See Instructions) INTUIT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINEDA, ROBERTO <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SOFTWARE PROGRAMMER		Employer (See Instructions) INTUIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3219/4629 Rpt: 3222/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINEDA TURI, LUZIRIS <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77088	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE VICE PROVOST		9 Employer (See Instructions) RICE UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		Employer (See Instructions) NJ PINELANDS COMMISSION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		Employer (See Instructions) NJ PINELANDS COMMISSION
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3220/4629 Rpt: 3223/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH	7 Amount of Contribution (\$) \$22.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		9 Employer (See Instructions) NJ PINELANDS COMMISSION
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3221/4629 Rpt: 3224/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		Employer (See Instructions) NJ PINELANDS COMMISSION
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		Employer (See Instructions) NJ PINELANDS COMMISSION
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3222/4629 Rpt: 3225/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		9 Employer (See Instructions) NJ PINELANDS COMMISSION
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3223/4629 Rpt: 3226/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$20.22
8 Principal occupation / Job title (See Instructions) PLANNING ASSISTANT		9 Employer (See Instructions) NJ PINELANDS COMMISSION
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINES, MITCHELL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINEZICH, LYN <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11222-4206	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FILM PRODUCTION		Employer (See Instructions) CAST & CREW
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINGOL, MONICA <hr/> Contributor address; City; State; Zip Code AMERICAN CANYON, CA 94503	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SCHOOL COUNSELOR		Employer (See Instructions) VALLEJO CITY USD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINKERTON, SAEDRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PINKERTON LEGAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3224/4629 Rpt: 3227/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINKERTON, SAEDRA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75243		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) PINKERTON LEGAL
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINKERTON, SAEDRA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75243		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PINKERTON LEGAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINKUS, AARON	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) MUSIC AGENT		Employer (See Instructions) WASSERMAN
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINNELLI, JANIS W	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78763		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) J PINNELLI COMPANY LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINOL, FELIX	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CLEARWATER BEACH, FL 33767		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3225/4629 Rpt: 3228/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINOL, FELIX <hr/> 6 Contributor address; City; State; Zip Code CLEARWATER BEACH, FL 33767	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINSON, MARGERY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINTAR, YVETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINTAR, YVETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIO, HOLLI <hr/> Contributor address; City; State; Zip Code FREDERICK, PA 19435	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JOB COACH		Employer (See Instructions) PALCO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3226/4629 Rpt: 3229/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITCHFORD, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) CRESCENT REAL ESTATE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITCOCK, PATTI <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITCOCK, PATTI <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITCOCK, PATTI <hr/> Contributor address; City; State; Zip Code WILLIS, TX 77318	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITMAN, ROD <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97202	Amount of Contribution (\$) \$839.00
Principal occupation / Job title (See Instructions) PRINCIPLE		Employer (See Instructions) ROD PITMAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3227/4629 Rpt: 3230/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITRE, ANITA <hr/> 6 Contributor address; City; State; Zip Code FORT MILL, SC 29708	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TICK		9 Employer (See Instructions) MS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITT, ELEANOR <hr/> Contributor address; City; State; Zip Code WEST HAVEN, CT 06516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTMAN, IAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JORGESON PITTMAN LLP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTMAN, KRIS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77011	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) NASH
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTMAN, W. LEE <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PITTMAN, DUTTON & HELLUMS, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3228/4629 Rpt: 3231/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTS, ALTON <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	7 Amount of Contribution (\$) \$31.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTS, BERLETHIA J <hr/> Contributor address; City; State; Zip Code MACON, GA 31220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) FVSU
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIZZI, ELISE <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLANT, CYNTHIA <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006-7318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEQCHER		Employer (See Instructions) TRTS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLANT, CYNTHIA <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006-7318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEQCHER		Employer (See Instructions) TRTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3229/4629 Rpt: 3232/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLANT, STANLEY <hr/> 6 Contributor address; City; State; Zip Code FRANKTOWN, CO 80116	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) LUTHIER		9 Employer (See Instructions) SELF-EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLASTIRAS, BASIL <hr/> Contributor address; City; State; Zip Code NOVATO, CA 94949	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PLASTIRAS & TERRIZZI APC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLATA, CECILIA <hr/> Contributor address; City; State; Zip Code LACONNER, WA 98257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLAZA, DOROTHY <hr/> Contributor address; City; State; Zip Code FAIR LAWN, NJ 07410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLAZA, DOROTHY <hr/> Contributor address; City; State; Zip Code FAIR LAWN, NJ 07410	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3230/4629 Rpt: 3233/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLAZA, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code FAIR LAWN, NJ 07410	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLAZA, DOROTHY <hr/> Contributor address; City; State; Zip Code FAIR LAWN, NJ 07410	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLAZA, DOROTHY <hr/> Contributor address; City; State; Zip Code FAIR LAWN, NJ 07410	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLAZA, DOROTHY <hr/> Contributor address; City; State; Zip Code FAIR LAWN, NJ 07410	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASANTS, CHRYSTIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH MONITOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3231/4629 Rpt: 3234/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASANTS, CHRYSTIN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75214		
8 Principal occupation / Job title (See Instructions) CLINICAL RESEARCH MONITOR		9 Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASANTS, CHRYSTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH MONITOR		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASANTS, CHRYSTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH MONITOR		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASANTS, CHRYSTIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH MONITOR		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASANTS, CHRYSTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH MONITOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3232/4629 Rpt: 3235/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLEASURE, MARTHA <hr/> 6 Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLESA, MIHAELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STATE LEGISLATOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLESA, MIHAELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE LEGISLATOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLESA, MIHAELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) STATE LEGISLATOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLESA, MIHAELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) STATE LEGISLATOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3233/4629 Rpt: 3236/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLICHTA, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code LITTLETON, CO 80127	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) CBP
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLOCK, AUGUST <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLOCK, AUGUST <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3234/4629 Rpt: 3237/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> 6 Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3235/4629 Rpt: 3238/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> 6 Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUMMER, JERRY <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95864	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) SACRAMENTO COUNTY RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUNK, SHIRLEY <hr/> Contributor address; City; State; Zip Code SAINT AUGUSTINE, FL 32086	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUSNICK, TOLA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) WEATHERFORD COLLEGE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUSNICK, TOLA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) WEATHERFORD COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3236/4629 Rpt: 3239/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLUTA, JACKSON <hr/> 6 Contributor address; City; State; Zip Code DENVER, CO 80236	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONDUCTOR/ENGINEER		9 Employer (See Instructions) BNSF RAILWAY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PM, MVP <hr/> Contributor address; City; State; Zip Code JENKINTOWN, PA 19046	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PODDAR, SUSMITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POENISCH, THERESA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POENISCH, THERESA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3237/4629 Rpt: 3240/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POGUE, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code MESQUITE, TX 75150	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POGUE, STEPHEN <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75150	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POKELA, KIRK <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ALLY
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POKORNEY, SHERRI <hr/> Contributor address; City; State; Zip Code ELGIN, TX 78621-5011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLA, MARTA <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3238/4629 Rpt: 3241/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLAN, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) DEBORAH GOODELL POLAN, PC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLE, LAURA <hr/> Contributor address; City; State; Zip Code HARDY, VA 24101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLINO, ANNE <hr/> Contributor address; City; State; Zip Code WESTMINSTER, CO 80031	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLISSAINT, MICHAEL <hr/> Contributor address; City; State; Zip Code UNIONDALE, NY 11553	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) AIG
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLITIS, DEBORA <hr/> Contributor address; City; State; Zip Code SYRACUSE, NY 13214	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3239/4629 Rpt: 3242/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, AMANDA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code MANVEL, TX 77578		
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, AMANDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MANVEL, TX 77578		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, AMANDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MANVEL, TX 77578		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, JOHN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HAVRE DE GRACE, MD 21078		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, SANDRA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77090		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3240/4629 Rpt: 3243/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLLAN, CINDY <hr/> 6 Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLLARD, DONNIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) FREEMAN MILLS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLLARD, GARETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLLOCK, RANDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) HDR
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLSON, JIM <hr/> Contributor address; City; State; Zip Code BEARSVILLE, NY 12409	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3241/4629 Rpt: 3244/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLYAK BROWN & ASSOC., BARBARA LANDAU <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLYAK BROWN & ASSOC., BARBARA LANDAU <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90025	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POMERANCE, KEN <hr/> Contributor address; City; State; Zip Code FORT LAUDERDALE, FL 33328	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) INTHEROOMS.COM
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POMEROY, ELLEN <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POMYKAL, KEITH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) COMMERCIAL REAL ESTATE		Employer (See Instructions) POMYKAL LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3242/4629 Rpt: 3245/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PONCE, ABRAHAM	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code ROANOKE, TX 76262		
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) SKIDATA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POND, TIM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019-1832		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POND, TIM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019-1832		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POND, TIM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019-1832		
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POOL, JOE	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ACCELEVATE 2020

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3243/4629 Rpt: 3246/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POOLE, CAROLYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77053	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POOLE, CYNTHIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POOLE, OLYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DECKER POOLE, PLLC
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POOLE, OLYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76116	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DECKER POOLE, PLLC
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPE, GAVIN <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SUBSTITUTE TEACHER		Employer (See Instructions) COMAL ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3244/4629 Rpt: 3247/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPHAM, JAY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78744	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDITOR		9 Employer (See Instructions) CHOICE MAGAZINE LISTENING
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPHAM, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) CHOICE MAGAZINE LISTENING
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPHAM, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) CHOICE MAGAZINE LISTENING
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPHAM, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) CHOICE MAGAZINE LISTENING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPINCHALK, PAUL <hr/> Contributor address; City; State; Zip Code WORCESTER, MA 01602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3245/4629 Rpt: 3248/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPKO, ANGELA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) FWISD
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPKO, ANGELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) FWISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, DARLENE <hr/> Contributor address; City; State; Zip Code NEW BERLIN, WI 53151	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> Contributor address; City; State; Zip Code YARMOUTH, MA 02673	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> Contributor address; City; State; Zip Code YARMOUTH, MA 02673	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3246/4629 Rpt: 3249/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> 6 Contributor address; City; State; Zip Code YARMOUTH, MA 02673	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> Contributor address; City; State; Zip Code YARMOUTH, MA 02673	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> Contributor address; City; State; Zip Code YARMOUTH, MA 02673	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> Contributor address; City; State; Zip Code YARMOUTH, MA 02673	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> Contributor address; City; State; Zip Code YARMOUTH, MA 02673	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3247/4629 Rpt: 3250/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPP, NANCY <hr/> 6 Contributor address; City; State; Zip Code YARMOUTH, MA 02673	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPPOON, STEPHEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POPULIS, HARRY <hr/> Contributor address; City; State; Zip Code FORT JONES, CA 96032	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) AERODYNE INDUSTRIES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) AERODYNE INDUSTRIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3248/4629 Rpt: 3251/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) STATISTICIAN		9 Employer (See Instructions) RETIRED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) AERODYNE INDUSTRIES
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) AERODYNE INDUSTRIES
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STATISTICIAN		Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORITZ, DARWIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062-2189	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3249/4629 Rpt: 3252/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORRAS, ALFRED	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77093		
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) HOUSTON COMMUNITY SERVICES
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORRAS, ALFRED	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77093		
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) HOUSTON COMMUNITY SERVICES
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORRAS, ALFRED	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77093		
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) HOUSTON COMMUNITY SERVICES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORRAS, ELEANOR	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77345		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORRAS, ELEANOR	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KINGWOOD, TX 77345		
Principal occupation / Job title (See Instructions) CSA		Employer (See Instructions) UNITED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3250/4629 Rpt: 3253/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORRAS, ELEANOR <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CSA		9 Employer (See Instructions) UNITED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTA, BONNIE <hr/> Contributor address; City; State; Zip Code PORTLAND, ME 04101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, ALISA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, CAROLINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) PORTER ARCHITECTURE AND DESIGN
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, CAROLINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) PORTER ARCHITECTURE AND DESIGN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3251/4629 Rpt: 3254/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, CATHERINE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) QUINN EMANUEL URQUHART & SULLIVAN, LLP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) QUINN EMANUEL URQUHART & SULLIVAN, LLP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NONPROFIT		Employer (See Instructions) CHILD INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3252/4629 Rpt: 3255/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, DONALD	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GRANBURY, TX 76049		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201-5447		
Principal occupation / Job title (See Instructions) ARTIST MANAGEMENT		Employer (See Instructions) JOHN PORTER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, JULIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ABILENE, TX 79605		
Principal occupation / Job title (See Instructions) SPECIALIST		Employer (See Instructions) STERITECH
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, JULIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ABILENE, TX 79605		
Principal occupation / Job title (See Instructions) SPECIALIST		Employer (See Instructions) STERITECH
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, KATHERINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WOODBURY, MN 55129		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3253/4629 Rpt: 3256/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code WOODBURY, MN 55129	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, KATHERINE <hr/> Contributor address; City; State; Zip Code WOODBURY, MN 55129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, KATHERINE <hr/> Contributor address; City; State; Zip Code WOODBURY, MN 55129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, KATHY <hr/> Contributor address; City; State; Zip Code HENDERSON, TX 75654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, MARGARET <hr/> Contributor address; City; State; Zip Code BOULDER, CO 80304	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3254/4629 Rpt: 3257/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, RACHEL <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER, RACHEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER-NIELSEN, RICHARD <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTER-NIELSEN, RICHARD <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTIER, JASON <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SYSTEMS ADMINISTRATOR		Employer (See Instructions) CHILDRENS HEALTH SYSTEM OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3255/4629 Rpt: 3258/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTIER, JASON <hr/> 6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SYSTEMS ADMINISTRATOR		9 Employer (See Instructions) CHILDRENS HEALTH SYSTEM OF TEXAS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTILLO, CHICO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCHOOL ADMINISTRATOR		Employer (See Instructions) LIBERTY HILL ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTILLO, MATTHEW <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTON, CINDY <hr/> Contributor address; City; State; Zip Code CLOVIS, CA 93611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTUGAL, DAVID <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) MEMORIAL HERMANN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3256/4629 Rpt: 3259/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PORTUGAL, DAVID <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) MEMORIAL HERMANN
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSADA, JACQUELINE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UT DELL MED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSEY, JOHANNA <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) NATURAL BRIDGE CAVERNS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSHPECK, RICH <hr/> Contributor address; City; State; Zip Code BRENTWOOD, NH 03833	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSNETT, DAVID <hr/> Contributor address; City; State; Zip Code CUTCHOGUE, NY 11935	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3257/4629 Rpt: 3260/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSNETT, DAVID <hr/> 6 Contributor address; City; State; Zip Code CUTCHOGUE, NY 11935	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSS, MELINDA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSS, MELINDA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSTMA, TANNER <hr/> Contributor address; City; State; Zip Code GREENSBORO, NC 27401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) TANNER POSTMA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POSTON, DAN <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45248	Amount of Contribution (\$) \$56.83
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3258/4629 Rpt: 3261/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77407	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTTER, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3259/4629 Rpt: 3262/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTTER, ANN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTTER, BRENDA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BEVERLY HILLS, CA 90210		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTTER, JASON	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76111		
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) ALPHA OMEGA HOSPICE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTTER, SHARON	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GALVESTON, TX 77554		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POULAS, CAROLINE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code SEATTLE, WA 98148		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3260/4629 Rpt: 3263/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POULAS, CAROLINE <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98148	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POUND, RENEE&ROBERT <hr/> Contributor address; City; State; Zip Code CONCORD, CA 94518	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POUNDERS, STEVEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76798-5490	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIVERSITY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POUNDERS, STEVEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76798-5490	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POUNDS, DAVE <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3261/4629 Rpt: 3264/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POURSAMADI, AMIR <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78717	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POVICH, RON <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWEL, HARFORD <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, BRIAN <hr/> Contributor address; City; State; Zip Code MATTHEWS, NC 28105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) BCBS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) HEWLETT PACKARD (HP)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3262/4629 Rpt: 3265/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77301	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) HEWLETT PACKARD (HP)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, ED <hr/> Contributor address; City; State; Zip Code RENO, NV 89523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78709	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3263/4629 Rpt: 3266/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> 6 Contributor address; City; State; Zip Code SAN LEON, TX 77539	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> Contributor address; City; State; Zip Code SAN LEON, TX 77539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> Contributor address; City; State; Zip Code SAN LEON, TX 77539	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> Contributor address; City; State; Zip Code SAN LEON, TX 77539	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> Contributor address; City; State; Zip Code SAN LEON, TX 77539	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3264/4629 Rpt: 3267/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> 6 Contributor address; City; State; Zip Code SAN LEON, TX 77539	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> Contributor address; City; State; Zip Code SAN LEON, TX 77539	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, GREIG <hr/> Contributor address; City; State; Zip Code SAN LEON, TX 77539	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, IDA <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, JONATHAN <hr/> Contributor address; City; State; Zip Code TAYLOR LAKE VILLAGE, TX 77586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENVIRONMENTAL CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3265/4629 Rpt: 3268/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, JONATHAN <hr/> 6 Contributor address; City; State; Zip Code TAYLOR LAKE VILLAGE, TX 77586	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ENVIRONMENTAL CONSULTANT		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, MYRA <hr/> Contributor address; City; State; Zip Code ELMIRA, OR 97437	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, MYRA <hr/> Contributor address; City; State; Zip Code ELMIRA, OR 97437	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWELL, STEVEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) AUSTIN REGIONAL CLINIC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWER, LEIGH <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3266/4629 Rpt: 3269/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, COLLEEN <hr/> 6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55403	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONTENT STRATEGIST		9 Employer (See Instructions) SOFTWARE FOR GOOD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, COLLEEN <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55403	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) CONTENT STRATEGIST		Employer (See Instructions) SOFTWARE FOR GOOD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, CYNDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$7.77
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, CYNDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$7.77
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, CYNDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$9.99
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3267/4629 Rpt: 3270/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, CYNDI <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$7.77
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, CYNDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$7.77
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, KATHLEEN <hr/> Contributor address; City; State; Zip Code WORCESTER, MA 01608	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMPUTER SYSTEMS ENGINEER		Employer (See Instructions) NTTDATA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, MAUREEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, MAUREEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3268/4629 Rpt: 3271/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, RACHEL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PLANNER		9 Employer (See Instructions) HARRIS COUNTY FLOOD CONTROL DISTRICT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, SHERYL <hr/> Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SAIC		Employer (See Instructions) EN ROUTE INSTRUCTOR
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, SHERYL <hr/> Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FAA		Employer (See Instructions) ATCS
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, SHERYL <hr/> Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FAA		Employer (See Instructions) ATCS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, SHERYL <hr/> Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FAA		Employer (See Instructions) ATCS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3269/4629 Rpt: 3272/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POWERS, SHERYL <hr/> 6 Contributor address; City; State; Zip Code NEW WAVERLY, TX 77358	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) FAA		9 Employer (See Instructions) ATCS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POZDRO, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756-3030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRAGER, CONNIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRAGER III PHD, HERMAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADJUNCT PROFESSOR OF GOVERNMENT		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRANGE, BILL <hr/> Contributor address; City; State; Zip Code LINCOLN, NE 68510	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3270/4629 Rpt: 3273/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRANGE, BILL <hr/> 6 Contributor address; City; State; Zip Code LINCOLN, NE 68510	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRATHER, DEBORAH <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXEC. ASSISTANT		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRATHER, DEBORAH <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXEC. ASSISTANT		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRECIADO, EMMA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRENNER, ALLEN <hr/> Contributor address; City; State; Zip Code BRONX, NY 10463	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) MOSAIC MH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3271/4629 Rpt: 3274/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRENTICE, CARA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code PLANO, TX 75075		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESCOTT, ROBIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESCOTT, ROBIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESCOTT, ROBIN	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESCOTT, ROBIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BOERNE, TX 78006		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3272/4629 Rpt: 3275/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESCOTT, ROBIN <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESSGROVE, CHERYL <hr/> Contributor address; City; State; Zip Code VANLEER, TN 37181	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESSMAN, KAREN <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02116	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESSMAN, RICHARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ST. MARY'S UNIVERSITY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESSMAN, RICHARD <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ST. MARY'S UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3273/4629 Rpt: 3276/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESSWOOD, KATRINA <hr/> 6 Contributor address; City; State; Zip Code KERRVILLE, TX 78028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESSWOOD, KATRINA <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTAGE, JAMES "GRADY" <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		Employer (See Instructions) FORT BEND COUNTY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, ANDREW <hr/> Contributor address; City; State; Zip Code DURHAM, NC 27707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSING ASSISTANT		Employer (See Instructions) HOMEWATCH CAREGIVERS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, JOHN W <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) HURD ENTERPRISES, LTD.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3274/4629 Rpt: 3277/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, JOHN W <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) HURD ENTERPRISES, LTD.
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, JOHN W <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, JOHN W <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, MARLOW <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRESTON, MARLOW <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3275/4629 Rpt: 3278/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRETE, MARION <hr/> 6 Contributor address; City; State; Zip Code EAST HAVEN, CT 06512	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PREVAS, FRANCES <hr/> Contributor address; City; State; Zip Code LAWNDALE, CA 90260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) COMPUTER CONSULTANT		Employer (See Instructions) PROSUM, INC.
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PREVAS, FRANCES <hr/> Contributor address; City; State; Zip Code LAWNDALE, CA 90260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) COMPUTER CONSULTANT		Employer (See Instructions) PROSUM, INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, CHARLES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, DENISE <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3276/4629 Rpt: 3279/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, DENISE <hr/> 6 Contributor address; City; State; Zip Code BELLINGHAM, WA 98226	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, DENISE <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, DENISE <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, ELIZABETH <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) UPCHURCH ARCHITECTS, INC.
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, ELIZABETH <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) UPCHURCH ARCHITECTS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3277/4629 Rpt: 3280/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code BRENHAM, TX 77833	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) UPCHURCH ARCHITECTS, INC.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, ELIZABETH <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) UPCHURCH ARCHITECTS, INC.
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, LANCE <hr/> Contributor address; City; State; Zip Code ADDISON, TX 75001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) CD SOURCE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, LAUREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) HOUSTON ISD
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, LAUREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) HOUSTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3278/4629 Rpt: 3281/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, MARGARET	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, MARGARET	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PORTSMOUTH, NH 03801		
Principal occupation / Job title (See Instructions) RETIRED BUT WORK PART TIME AT:		Employer (See Instructions) STRAWBERRY BANKE MUSEUM
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, SANDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WATAUGA, TX 76148		
Principal occupation / Job title (See Instructions) TECHNICAL ASSISTANT		Employer (See Instructions) WATAUGA PUBLIC LIBRARY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, SANDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WATAUGA, TX 76148		
Principal occupation / Job title (See Instructions) TECHNICAL ASSISTANT		Employer (See Instructions) WATAUGA PUBLIC LIBRARY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, SEAN	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3279/4629 Rpt: 3282/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, SUELLEN <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76708	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, SUELLEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, SUELLEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, VELVA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723-2552	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DISTRICT CLERK		Employer (See Instructions) TRAVIS COUNTY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRILLIMAN, ANGELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3280/4629 Rpt: 3283/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRILLIMAN, ANGELA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ENTREPRENEUR		9 Employer (See Instructions) SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRILLIMAN, ANGELA "HELI" <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRIMEAUX, JEFFREY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ARTIST/NETWORK TECH		Employer (See Instructions) SELF/NETSYNC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINCE, JOAN <hr/> Contributor address; City; State; Zip Code FORT LEE, NJ 07024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINCIPATO, ELIZABETH <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3281/4629 Rpt: 3284/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINCIPATO, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINGLE, JOHN <hr/> Contributor address; City; State; Zip Code MENLO PARK, CA 94025	Amount of Contribution (\$) \$1,024.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) STANFORD UNIVERSITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINTZ, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINTZ, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINTZ, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3282/4629 Rpt: 3285/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINTZ, BARBARA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRINZ, JEAN <hr/> Contributor address; City; State; Zip Code SAN GABRIEL, CA 91775	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHARD, ADAM <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76244	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) JPS HEALTH
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHARD, SUZANNE <hr/> Contributor address; City; State; Zip Code WEST POINT, TX 78963	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHARD, SUZANNE <hr/> Contributor address; City; State; Zip Code WEST POINT, TX 78963	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3283/4629 Rpt: 3286/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHETT, BRAD	7 Amount of Contribution (\$) \$1,500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) INTERIM CEO		9 Employer (See Instructions) EQUALITY TEXAS
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHETT, CARRIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BRAZOSPORT COLLEGE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHETT, MARY BESS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11215		
Principal occupation / Job title (See Instructions) STUDENT ENGAGEMENT MANAGER		Employer (See Instructions) THE JED FOUNDATION
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITSKER, ARNOLD	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SKOKIE, IL 60076		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRIVITERA, CECILIA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code EGG HARBOR TOWNSHIP, NJ 08234		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3284/4629 Rpt: 3287/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROCHASKA, COURTNEY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77079	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) SELF EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROCTER-SMITH, MARJORIE <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75165	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROCTOR, LINDA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) CATERPILLAR
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROGAR, THERESE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROIA, MARIE <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3285/4629 Rpt: 3288/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROSISE, EMILY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78733	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DERMATOLOGIST		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROUT, JO <hr/> Contributor address; City; State; Zip Code TAHLEQUAH, OK 74464	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) CASA OF CHEROKEE COUNTRY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROUT, JO <hr/> Contributor address; City; State; Zip Code TAHLEQUAH, OK 74464	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMINISTRATOR		Employer (See Instructions) CASA OF CHEROKEE COUNTRY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROVENCHER, DENISE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROVENCHER, DENISE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3286/4629 Rpt: 3289/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROVENZA, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code HELOTES, TX 78023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROVOST, LORI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROVOST, PATRICIA <hr/> Contributor address; City; State; Zip Code WATERTOWN, MA 02472-2873	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROVOST-EVANS, DARIUS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044-2253	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CPS INVESTIGATOR		Employer (See Instructions) DEPARTMENT OF FAMILY PROTECTIVE SERVICES
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PROWN, LISE <hr/> Contributor address; City; State; Zip Code PEEKSKILL, NY 10566	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3287/4629 Rpt: 3290/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUDOWSKY, MARK <hr/> 6 Contributor address; City; State; Zip Code FREMONT, CA 94536	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) INSTRUCTOR		9 Employer (See Instructions) SISTAS WITH TOOLS
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUETT, THERESA <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98026	Amount of Contribution (\$) \$3.33
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PRUETT WALTERS LARSEN PLLC
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUETT, THERESA <hr/> Contributor address; City; State; Zip Code EDMONDS, WA 98026	Amount of Contribution (\$) \$3.33
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PRUETT WALTERS LARSEN PLLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUITT, DANIEL <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUITT, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3288/4629 Rpt: 3291/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUITT, SANDI <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75220	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUITT, SANDI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRUITT, SARAH <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) APPLICATION ANALYST		Employer (See Instructions) UNITED REGIONAL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRYOR, ALLYSON <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) LUTHERAN CHURCH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRYSOCK, STEPHANIE <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HOUSEWIFE		Employer (See Instructions) STEPHANIE PRYSOCK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3289/4629 Rpt: 3292/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRYWES, JOSHUA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) GREENBERG TRAUERIG
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRYZANT, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRZEWLOCKI, SUNITA <hr/> Contributor address; City; State; Zip Code HILO, HI 96720	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) REALTOR
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRZEWLOCKI, SUNITA <hr/> Contributor address; City; State; Zip Code HILO, HI 96720	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) REALTOR
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRZEWLOCKI, SUNITA <hr/> Contributor address; City; State; Zip Code HILO, HI 96720	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) REALTOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3290/4629 Rpt: 3293/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUCKETT, TOM <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 85715	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUENTE, ERIC <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUENTE, ERIC <hr/> Contributor address; City; State; Zip Code DUNCANVILLE, TX 75137	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) PUENTE LAW FIRM, PLLC
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUENTE, ERIC <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUENTE, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) SAWS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3291/4629 Rpt: 3294/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUENTE, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) SAWS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUGATCH, CANDACE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULIS, JEFFREY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULITZER, JESSICA <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NYC DSS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLEN, CHERYL <hr/> Contributor address; City; State; Zip Code SHEPHERDSTOWN, WV 25443	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3292/4629 Rpt: 3295/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLEN, JONATHAN <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98133	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SYSTEMS INTEGRATOR		9 Employer (See Instructions) NUMBERMINING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLEN, WESLEY <hr/> Contributor address; City; State; Zip Code SURPRISE, AZ 85374	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CLINICAL THERAPIST		Employer (See Instructions) GENTLE PATH AT THE MEADOWS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLY, LAUREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING MANAGER		Employer (See Instructions) CISCO
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLY, LAUREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING MANAGER		Employer (See Instructions) CISCO
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PULLY, LAUREN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEERING MANAGER		Employer (See Instructions) CISCO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3293/4629 Rpt: 3296/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMFREY, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78736	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMFREY, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736-3312	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMFREY, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736-3312	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMMILL, J. PATRICK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ACME PROFESSIONAL INC
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMMILL, J. PATRICK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ACME PROFESSIONAL INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3294/4629 Rpt: 3297/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMPHREY, LOYCE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMPHREY, LOYCE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUNARO, VINCENT	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURA, CYNTHIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SOLEDAD, CA 93960		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURA, CYNTHIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SOLEDAD, CA 93960		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3295/4629 Rpt: 3298/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURA, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code SOLEDAD, CA 93960	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURA, CYNTHIA <hr/> Contributor address; City; State; Zip Code SOLEDAD, CA 93960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURCELL, CAROL <hr/> Contributor address; City; State; Zip Code ROCHESTER, MN 55906	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURCELL, MIKE <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79121	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURCELL, SUSANNE <hr/> Contributor address; City; State; Zip Code MEAD, CO 80542-4034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3296/4629 Rpt: 3299/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURCELL, SUSANNE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code MEAD, CO 80542-4034		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURDUE, LYNETTE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KNOXVILLE, TN 37920		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURDUE, LYNETTE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KNOXVILLE, TN 37920		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURDY, SHELLY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUREKA, MICHAEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) NANTHEALTH, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3297/4629 Rpt: 3300/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURINGTON, DEBORAH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code TOLLAND, CT 06084		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELL, TRACY	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code PLANO, TX 75025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSER, THOMAS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77006		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSER, THOMAS RAY	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSER, THOMAS RAY	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3298/4629 Rpt: 3301/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURVIS, PEGGY <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURVIS, PEGGY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURVIS, PEGGY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURVIS, PEGGY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURVIS, PEGGY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3299/4629 Rpt: 3302/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUTMAN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) PUTMAN LAW FIRM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUTMAN, STACY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) INEOS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUTNAM, ETHAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) INSURANCE PROFESSIONAL		Employer (See Instructions) HIGGINBOTHAM
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUTNAM, ETHAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) INSURANCE PROFESSIONAL		Employer (See Instructions) HIGGINBOTHAM
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUTT, MAGALLY <hr/> Contributor address; City; State; Zip Code APOPKA, FL 32703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) AH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3300/4629 Rpt: 3303/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYATSKOWIT, RUTH <hr/> 6 Contributor address; City; State; Zip Code SHAWANO, WI 54166	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYATSKOWIT, RUTH <hr/> Contributor address; City; State; Zip Code SHAWANO, WI 54166	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, DAVID <hr/> Contributor address; City; State; Zip Code KENSINGTON, CA 94708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, DAVID <hr/> Contributor address; City; State; Zip Code KENSINGTON, CA 94708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, SUANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3301/4629 Rpt: 3304/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, SUANNE <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, SUANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, SUANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, SUANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, SUANNE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3302/4629 Rpt: 3305/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QADDUMI, ANAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) DEVELOPER		9 Employer (See Instructions) LAMAR BUILDERS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QADRI, HINA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QADRI, ZOHAIB <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COUNCIL MEMBER		Employer (See Instructions) CITY OF AUSTIN
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QASEM, YASER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) YASER QASEM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QIRKO, INGRID <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92116	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) WARREN-WALKER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3303/4629 Rpt: 3306/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QIU, HONG <hr/> 6 Contributor address; City; State; Zip Code DUBLIN, OH 43016	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PROFESSIONAL		9 Employer (See Instructions) ABC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUAN, GORDON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) QUAN LAW GROUP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUASNITSCHKA, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) NOT SAYING
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUASNITSCHKA, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) MAINE HEALTH
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUASNITSCHKA, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) NOT SAYING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3304/4629 Rpt: 3307/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUASNITSCHKA, JOHN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) NOT SAYING
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUEEN, JANICE <hr/> Contributor address; City; State; Zip Code LEXINGTON, NC 27292	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUEENAN, BRIAN <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45242	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) PNC BANK
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUEREAU, GAY D. <hr/> Contributor address; City; State; Zip Code SHAKER HEIGHTS, OH 44120	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUEREAU, GAY D. <hr/> Contributor address; City; State; Zip Code SHAKER HEIGHTS, OH 44120	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3305/4629 Rpt: 3308/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUICK, LYNN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIGLEY, MELISSA <hr/> Contributor address; City; State; Zip Code NEW ORLEANS, LA 70119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CITY OF NEW ORLEANS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUILLO, TED <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89014	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINCY, PATRICK <hr/> Contributor address; City; State; Zip Code ROSENBERG, TX 77469	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		Employer (See Instructions) FORT BEND COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINN, JOHN <hr/> Contributor address; City; State; Zip Code AUBURN, AL 36830	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3306/4629 Rpt: 3309/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		9 Employer (See Instructions) O'REILLY AUTO PARTS
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINN, MICHAEL <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		Employer (See Instructions) O'REILLY AUTO PARTS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINN, VAL <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINN, VAL <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONES, ANITA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3307/4629 Rpt: 3310/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONES, ANITA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONES, EMMANUEL <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79415	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DISHWASHER		Employer (See Instructions) THE PLAZA RESTAURANT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONES, EMMANUEL <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79415	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) DISHWASHER		Employer (See Instructions) THE PLAZA RESTAURANT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONEZ, JUDITH <hr/> Contributor address; City; State; Zip Code WHITTIER, CA 90605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) CITY OF LA MIRADA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINTANILLA, YESENIA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89103	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) WESTERN GROWERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3308/4629 Rpt: 3311/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINTERO, ALICIA	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code CHICAGO, IL 60659		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) CPS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINTERO, ALICIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CHICAGO, IL 60659		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CPS
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINTO, ALBERT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AMARILLO, TX 79102		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIRK, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIRK, MICHAEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3309/4629 Rpt: 3312/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIRK, MONIQUE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78759		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIRKE, GEORGENE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77042		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIROS, AUGUSTO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10034		
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) DOE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIROS, AUGUSTO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10034		
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) DOE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIROS, AUGUSTO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10034		
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) DOE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3310/4629 Rpt: 3313/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUIROZ, JOAN <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUITTNER, CLAUDIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) RESEARCH NURSE		Employer (See Instructions) UT SOUTHWESTERN MEDICAL CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUUENA ROWE, LA <hr/> Contributor address; City; State; Zip Code GLENN HEIGHTS, TX 75154	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CASE MANAGER V		Employer (See Instructions) CHILD PROTECTIVE SERVICES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R HECHT, PETER <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19147	Amount of Contribution (\$) \$10.12
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R PATTON, MARY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR, IT		Employer (See Instructions) IHS MARKIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3311/4629 Rpt: 3314/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R. GALLAGHER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R. GALLAGHER, SUSAN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R. GALLAGHER, SUSAN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAAB, CINDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) SHIELD-AYRES FOUNDATION
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABB, DOROTHY <hr/> Contributor address; City; State; Zip Code SICKLERVILLE, NJ 08081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) CTC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3312/4629 Rpt: 3315/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABB, PATRICK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79902		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) PATRICK J. RABB
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABB, PATRICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code EL PASO, TX 79902		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) PATRICK J. RABB
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABE, YEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77089		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PASADENA HIGH
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABE, YEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77089		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PASADENA HIGH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABINOR, IRENE	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code ATLANTA, GA 30342		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3313/4629 Rpt: 3316/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABINOR, IRENE <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30342	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABINOR, IRENE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30342	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABINOR, IRENE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30342	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABINOR, IRENE <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30342	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABINOWITZ, SHERA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADVERTISING		Employer (See Instructions) INIZIO EVOKE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3314/4629 Rpt: 3317/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABKIN, JEFFREY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code WACO, TX 76710		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3315/4629 Rpt: 3318/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code KILLEEN, TX 76542		
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF KILLEEN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KILLEEN, TX 76542		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3316/4629 Rpt: 3319/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76542	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF KILLEEN
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABROKER, TIMOTHY <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF KILLEEN
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABURN, CAROL <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3317/4629 Rpt: 3320/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RABURN, CAROL <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADDOCK, FRANKLIN <hr/> Contributor address; City; State; Zip Code STAMFORD, CT 06905-3604	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HEALTH PROFESSIONAL		Employer (See Instructions) PSYCHASSOCIATES
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADEBAUGH, GALE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADEL, RICHARD <hr/> Contributor address; City; State; Zip Code STILLWATER, MN 55082-5370	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADER, ANDREA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) KOMEN BC FOUNDATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3318/4629 Rpt: 3321/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADER, ANDREA <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76013	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) PR		9 Employer (See Instructions) KOMEN BC FOUNDATION
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADER, WILLA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADEY, TAYLOR <hr/> Contributor address; City; State; Zip Code BRECKSVILLE, OH 44141	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) SELF-EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADJEF, TAREK LUCIEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADJEF, TAREK LUCIEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3319/4629 Rpt: 3322/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADNOFSKY, BARBARA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADOVSKY, LAURIE <hr/> Contributor address; City; State; Zip Code ST PAUL, MN 55105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RADUE, ROGER <hr/> Contributor address; City; State; Zip Code MARTINSVILLE, IN 46151	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAE, CHERYL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFF, CAMBRIDGE ADDRESS <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3320/4629 Rpt: 3323/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFF, ELLEN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75219		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFAELLI, PAULO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94112		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CISCO MERAKI
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFAELLI, PAULO	Amount of Contribution (\$) \$6.24
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94112		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CISCO MERAKI
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFERTY, JOHN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code EMERYVILLE, CA 94608		
Principal occupation / Job title (See Instructions) MARKETING DIRECTOR		Employer (See Instructions) TRIC TOOLS, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFLE, SUSAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3321/4629 Rpt: 3324/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFLE, SUSAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77004	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFFLE, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAGONA, SAUNDRA <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) HELP DESK MANAGER		Employer (See Instructions) ST EDWARDS UNIVERSITY
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHMAN, AMIR <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHMAN, AMIR <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE INV		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3322/4629 Rpt: 3325/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHMAN, AMIR <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75032	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		9 Employer (See Instructions) SELF
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHMAN, AMIR <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE INV		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHMAN, NAHEED <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024-6307	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PEDIATRICIAN		Employer (See Instructions) STEEPLECHASE PEDIATRICS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHN, CAROL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209-4845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAHN, KAREN <hr/> Contributor address; City; State; Zip Code MARION, VA 24354	Amount of Contribution (\$) \$3.58
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3323/4629 Rpt: 3326/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINBOW, LUELLA <hr/> 6 Contributor address; City; State; Zip Code COCOA, FL 32926	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PORT CRUISE REP		9 Employer (See Instructions) DISNEY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINEY, DEREK <hr/> Contributor address; City; State; Zip Code PORTLAND, MI 48875	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINEY, DEREK <hr/> Contributor address; City; State; Zip Code PORTLAND, MI 48875	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINS, BONNI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIPE, DENISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SUPERVISOR, CUSTOMER SERVICE		Employer (See Instructions) UNITED STATES POSTAL SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3324/4629 Rpt: 3327/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code LIGONIER, PA 15658	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> Contributor address; City; State; Zip Code LIGONIER, PA 15658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> Contributor address; City; State; Zip Code LIGONIER, PA 15658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> Contributor address; City; State; Zip Code LIGONIER, PA 15658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> Contributor address; City; State; Zip Code LIGONIER, PA 15658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3325/4629 Rpt: 3328/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code LIGONIER, PA 15658		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code LIGONIER, PA 15658		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LIGONIER, PA 15658		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code LIGONIER, PA 15658		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LIGONIER, PA 15658		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3326/4629 Rpt: 3329/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code LIGONIER, PA 15658		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code LIGONIER, PA 15658		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAJARAMAN, RAVINDRAN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code MORGANVILLE, NJ 07751		
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAJARAMAN, RAVINDRAN	Amount of Contribution (\$) \$7.15
Contributor address; City; State; Zip Code MORGANVILLE, NJ 07751		
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAJARAMAN, RAVINDRAN	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code MORGANVILLE, NJ 07751		
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3327/4629 Rpt: 3330/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAJARAMAN, RAVINDRAN <hr/> 6 Contributor address; City; State; Zip Code MORGANVILLE, NJ 07751	7 Amount of Contribution (\$) \$7.15
8 Principal occupation / Job title (See Instructions) DOCTOR		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAJARAMAN, RAVINDRAN <hr/> Contributor address; City; State; Zip Code MORGANVILLE, NJ 07751	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAKIDZICH, GABRIELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AUDIOLOGIST		Employer (See Instructions) STARKEY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RALPH, BEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) CARPENTER		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RALPH, KIM <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) LPI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3328/4629 Rpt: 3331/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RALPH, KIM <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE		9 Employer (See Instructions) LPI
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RALPH, KIM <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) LPI
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMABHADRAN, SANJAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) VERSA INFRASTRUCTURE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMABHADRAN, SANJAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$5,222.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) VERSA INFRASTRUCTURE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMACHANDRAN, KARI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3329/4629 Rpt: 3332/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMACHANDRAN, SUNDER <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		9 Employer (See Instructions) BAKER HUGHES
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMACHANDRAN, SUNDER <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) BAKER HUGHES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMAKRISHNAN, LAKSHMI <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS RIOGRANDE LEGAL AID, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMANKUTTY, JAYAN <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMANKUTTY, JAYAN <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3330/4629 Rpt: 3333/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMBOW, MARILYN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77081		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMBOW, MARILYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77081		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMEY, JEANNIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139		
Principal occupation / Job title (See Instructions) EXEC		Employer (See Instructions) SYNAPSE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ANNETTE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ALDINE ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ELIAS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TEXAS CITY, TX 77590		
Principal occupation / Job title (See Instructions) YOUTH DEVELOPMENT SPECIALIST		Employer (See Instructions) BOYS & GIRLS CLUB OF GREATER HOUSTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3331/4629 Rpt: 3334/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ELIAS <hr/> 6 Contributor address; City; State; Zip Code TEXAS CITY, TX 77590	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) YOUTH DEVELOPMENT SPECIALIST		9 Employer (See Instructions) BOYS & GIRLS CLUB OF GREATER HOUSTON
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ELIAS <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77590	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) YOUTH DEVELOPMENT SPECIALIST		Employer (See Instructions) BOYS & GIRLS CLUB OF GREATER HOUSTON
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ELIAZAR <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550-3925	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) COLLEGE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ERIKA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, GARY <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76301	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FOUNDRY		Employer (See Instructions) WF MFG.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3332/4629 Rpt: 3335/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, JOSE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BAYSHORE, NY 11706		
8 Principal occupation / Job title (See Instructions) HVAC		9 Employer (See Instructions) LOCAL 638
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, LORENA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COPPERAS COVE, TX 76522		
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) APPLIED LIVING SOLUTIONS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, LORENA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COPPERAS COVE, TX 76522		
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) APPLIED LIVING SOLUTIONS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, MARINA	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code HOUSTON, TX 77047		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AGC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, MARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3333/4629 Rpt: 3336/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, MARY <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, MINITA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78043	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) COLLEGE PRESIDENT		Employer (See Instructions) LAREDO COLLEGE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, RENE <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, RENE <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, RENE <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$502.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3334/4629 Rpt: 3337/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, TARA <hr/> 6 Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94546	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) ASANA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMMELKAMP, ABBY <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMMELKAMP, ABBY <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMMELKAMP, ABBY <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMMELKAMP, ABBY <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3335/4629 Rpt: 3338/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMON, CAMILA <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11249-3420	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, ANA-MARIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$1,481.28
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AMR LAW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, ANA-MARIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75085	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AMR LAW & ASSOCIATES
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, GUILLERMO <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, JULIO <hr/> Contributor address; City; State; Zip Code DEL RIO, TX 78840	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3336/4629 Rpt: 3339/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, JULIO <hr/> 6 Contributor address; City; State; Zip Code DEL RIO, TX 78840	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMOS, ROLANDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78210	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RAMOS & DEL CUETO, PLLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMPEY, WAYNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3337/4629 Rpt: 3340/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, KATHERINE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) RAMSEY LAW
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, KATHERINE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RAMSEY LAW
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, RICK	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ST LOUIS, MO 63130		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, SCOTT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, SUSAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WAYNE, NJ 07470		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3338/4629 Rpt: 3341/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, TERESA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PRODUCER		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSHAW, GREGG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSHAW, GREGG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSHAW, GREGG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANA, SAUMYA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3339/4629 Rpt: 3342/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, CHERYL <hr/> 6 Contributor address; City; State; Zip Code SALEM, OR 97301	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, CHERYL <hr/> Contributor address; City; State; Zip Code SALEM, OR 97301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, CHERYL <hr/> Contributor address; City; State; Zip Code SALEM, OR 97301	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, JENNIFER <hr/> Contributor address; City; State; Zip Code HALSET, TX 76052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDALL, RON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3340/4629 Rpt: 3343/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDEL, BRENNAN <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97216	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TITLEMATCHING ASSOC		9 Employer (See Instructions) RENTRAK CORP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDELS, STEPHEN <hr/> Contributor address; City; State; Zip Code BOTHELL, WA 98011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDLE, CATHERINE <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94024	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) HIGHER ED		Employer (See Instructions) UNIVERSITY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDLE, FLOANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF-EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDLE, GOLDIE <hr/> Contributor address; City; State; Zip Code NORTH AUGUSTA, SC 29860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3341/4629 Rpt: 3344/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDLE, GOLDIE <hr/> 6 Contributor address; City; State; Zip Code NORTH AUGUSTA, SC 29860	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDLE, GOLDIE <hr/> Contributor address; City; State; Zip Code NORTH AUGUSTA, SC 29860	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDLE, GOLDIE <hr/> Contributor address; City; State; Zip Code NORTH AUGUSTA, SC 29860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDOLPH, AUSTIN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76177	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) IT COMPANY
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANDOLPH, TIM <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3342/4629 Rpt: 3345/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANGEL, HILDA <hr/> 6 Contributor address; City; State; Zip Code MCALLEN, TX 78504	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANIS, SHERI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) THECB
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANIS, SHERI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) THECB
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANJITHAN, NAGARATNAM <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAO, SRINIVASAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3343/4629 Rpt: 3346/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAO, SRINIVASAN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAO, SRINIVASAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAO, SRINIVASAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78257	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPOLU, VIJAYA <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KAVI CONSULTING, INC.
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPOLU, VIJAYA <hr/> Contributor address; City; State; Zip Code KATY, TX 77494	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) KAVI CONSULTING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3344/4629 Rpt: 3347/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, RAYNA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10011	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		9 Employer (See Instructions) NYU
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, RAYNA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) NYU
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPTOPOULOS, DEBORAH <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FAMILY THERAPIST		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCHKE, DONALD <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-5139	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCHKE, DONALD <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833-5139	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3345/4629 Rpt: 3348/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCO, ROGER <hr/> 6 Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASCO, ROGER <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASH, GAIL <hr/> Contributor address; City; State; Zip Code GUNNISON, CO 81230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASH, JEANETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) MILAM ST AUTO
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASH, SONIA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER/JUDGE		Employer (See Instructions) FB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3346/4629 Rpt: 3349/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASH, SONIA <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LAWYER/JUDGE		9 Employer (See Instructions) FB
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASHED, DIANA <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) SITE VISIT COORD		Employer (See Instructions) TEXAS MEDICAID
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASMUS, RUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) ST JOHNS UMC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASMUSSEN, THOMAS <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98116	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASOR, CAROL <hr/> Contributor address; City; State; Zip Code LAWRENCE, KS 66047	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3347/4629 Rpt: 3350/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASTI, KELLY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) EDUCATION		9 Employer (See Instructions) TASB
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASTI, KELLY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78256	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) TASB
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASTRELLI, BRUCE <hr/> Contributor address; City; State; Zip Code SALEM, OR 97304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASTRELLI, BRUCE <hr/> Contributor address; City; State; Zip Code SALEM, OR 97304	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATLIFF, AMELIE <hr/> Contributor address; City; State; Zip Code JAMAICA PLAIN, MA 02130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3348/4629 Rpt: 3351/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATLIFF, AMELIE <hr/> 6 Contributor address; City; State; Zip Code JAMAICA PLAIN, MA 02130	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATNOFF, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF-EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATNOFF, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF-EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATNOFF, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF-EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATNOFF, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3349/4629 Rpt: 3352/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTIGAN, PETER <hr/> 6 Contributor address; City; State; Zip Code PITMAN, NJ 08071	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ASST. PROFESSOR		9 Employer (See Instructions) ROWAN UNIVERSITY
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTIGAN, PETER <hr/> Contributor address; City; State; Zip Code PITMAN, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASST. PROFESSOR		Employer (See Instructions) ROWAN UNIVERSITY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTIGAN, PETER <hr/> Contributor address; City; State; Zip Code PITMAN, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASST. PROFESSOR		Employer (See Instructions) ROWAN UNIVERSITY
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTIGAN, PETER <hr/> Contributor address; City; State; Zip Code PITMAN, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASST. PROFESSOR		Employer (See Instructions) ROWAN UNIVERSITY
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATTIGAN, PETER <hr/> Contributor address; City; State; Zip Code PITMAN, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ASST. PROFESSOR		Employer (See Instructions) ROWAN UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3350/4629 Rpt: 3353/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATZLAFF, JANE <hr/> 6 Contributor address; City; State; Zip Code ROSEBURG, OR 97470	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATZLAFF, JANE <hr/> Contributor address; City; State; Zip Code ROSEBURG, OR 97470	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAUCH, LEAH <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVEY, JENNIFER <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL MEDIA		Employer (See Instructions) EDUCATION DYNAMICS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVEY, JENNIFER <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL MEDIA		Employer (See Instructions) EDUCATION DYNAMICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3351/4629 Rpt: 3354/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVEY, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SOCIAL MEDIA		9 Employer (See Instructions) EDUCATION DYNAMICS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVEY, TIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMISSIONS OFFICER		Employer (See Instructions) UNIVERSITY OF CALIFORNIA, BERKELEY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVICZ, FRANCES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVICZ, FRANCES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVICZ, FRANCES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3352/4629 Rpt: 3355/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVICZ, FRANCES <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVICZ, FRANCES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWLINS, AIMEE <hr/> Contributor address; City; State; Zip Code AUMSVILLE, OR 97325	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) FREELANCE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWLINS, AIMEE <hr/> Contributor address; City; State; Zip Code AUMSVILLE, OR 97325	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) WRITER/EDITOR		Employer (See Instructions) FREELANCE
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWLINS, DIANA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RETIREE		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3353/4629 Rpt: 3356/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWLINS, MICHAEL C <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080-1962	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWLINS, MONICA <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) FORT BEND COUNTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, CAM <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ASCENSION TECHNOLOGIES
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, CAM <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ASCENSION TECHNOLOGIES
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, CAM <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ASCENSION TECHNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3354/4629 Rpt: 3357/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, JODI <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, JODI <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3355/4629 Rpt: 3358/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		9 Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3356/4629 Rpt: 3359/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		9 Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, LINDA C <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009-1889	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY ADVISOR		Employer (See Instructions) FEDERAL COMMUNICATIONS COMMISSION
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY-TAHTINEN, BRENDA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$130.00
Principal occupation / Job title (See Instructions) POSTAL CLERK		Employer (See Instructions) US POSTAL SERVICE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY-TAHTINEN, BRENDA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) POSTAL CLERK		Employer (See Instructions) US POSTAL SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3357/4629 Rpt: 3360/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYBUCK, SUSAN <hr/> 6 Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYBUCK, SUSAN <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYBUCK, SUSAN <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, BONNIE <hr/> Contributor address; City; State; Zip Code WOOLWICH, ME 04579	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, BONNIE <hr/> Contributor address; City; State; Zip Code WOOLWICH, ME 04579	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3358/4629 Rpt: 3361/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, BONNIE <hr/> 6 Contributor address; City; State; Zip Code WOOLWICH, ME 04579	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DESIGNER		9 Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, BONNIE <hr/> Contributor address; City; State; Zip Code WOOLWICH, ME 04579	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, BONNIE <hr/> Contributor address; City; State; Zip Code WOOLWICH, ME 04579	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, LAURA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUYER		Employer (See Instructions) TACKLEBOX OUTFITTERS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, MINER <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) CURVES INTERNATIONAL, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3359/4629 Rpt: 3362/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYMOND, MINER	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code WACO, TX 76710		
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) CURVES INTERNATIONAL, INC.
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNE, MARCIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KAUFMAN, TX 75142		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNE, MARCIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code KAUFMAN, TX 75142		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNER, ROB	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNER, ROB	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3360/4629 Rpt: 3363/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNER, ROBIN <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNER, ROBIN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYNOR, LIZA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) MOMENTOUS INSTITUTE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAYTON, PAUL <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READ, BARRY <hr/> Contributor address; City; State; Zip Code TROUP, TX 75789	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3361/4629 Rpt: 3364/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READ, BARRY <hr/> 6 Contributor address; City; State; Zip Code TROUP, TX 75789	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READ, FRED <hr/> Contributor address; City; State; Zip Code ARAPAHOE, NC 28510	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READ, FRED <hr/> Contributor address; City; State; Zip Code ARAPAHOE, NC 28510	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READ, FRED <hr/> Contributor address; City; State; Zip Code ARAPAHOE, NC 28510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READE, CINTHYA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LINEBARGER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3362/4629 Rpt: 3365/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READINGER, DONA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76114	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READY, DENNIS <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SIGNATURE ENVELOPE INC.
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) READY, DENNIS <hr/> Contributor address; City; State; Zip Code COLDSRING, TX 77331	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SIGNATURE ENVELOPE INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAGAN, JOANNA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAGAN, LIZZIE <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) 5TH GRADE TEACHER		Employer (See Instructions) HARLINGEN CISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3363/4629 Rpt: 3366/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAGAN, LIZZIE <hr/> 6 Contributor address; City; State; Zip Code HARLINGEN, TX 78550	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) 5TH GRADE TEACHER		9 Employer (See Instructions) HARLINGEN CISD
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAGAN, LIZZIE <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) 5TH GRADE TEACHER		Employer (See Instructions) HARLINGEN CISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAL, DORINE <hr/> Contributor address; City; State; Zip Code WESTPORT, CA 95488	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) HOTELIER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAM, AMY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAM, AMY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97225	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3364/4629 Rpt: 3367/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAT, MARIANNE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REAZIN, DAVID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080-5027		
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) US EPA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REBEIRO, SUMI	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code SPRINGFIELD, IL 62704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REBEIZ, MONICA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REBEIZ, MONICA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3365/4629 Rpt: 3368/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REBEIZ, MONICA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECH, GERALD <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECH, GERALD <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECHTSCHAFFEN, STEPHAN <hr/> Contributor address; City; State; Zip Code WOODSTOCK, NY 12498	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDICK, HEATHER <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3366/4629 Rpt: 3369/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDICK, LISA <hr/> 6 Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDICK, LISA <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDING, LYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77073-6122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INDEPENDENT INS AGENT		Employer (See Instructions) LYNN REDDING
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, KRIS <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, MARCIA <hr/> Contributor address; City; State; Zip Code EDMOND, OK 73012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3367/4629 Rpt: 3370/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> 6 Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3368/4629 Rpt: 3371/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> 6 Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDDY, VIJAY <hr/> Contributor address; City; State; Zip Code LAKE OSWEGO, OR 97034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDGATE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90807	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) LOS ANGELES COUNTY
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDGATE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90807	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) LOS ANGELES COUNTY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDMAN, KRISTEN <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76048	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3369/4629 Rpt: 3372/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDMAN, TED <hr/> 6 Contributor address; City; State; Zip Code SPOKANE, WA 99223	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDMOND, AIESHA <hr/> Contributor address; City; State; Zip Code DESOTO, TX 75115-2837	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDMOND, JOHNNY <hr/> Contributor address; City; State; Zip Code ARLINGTON, MA 02474	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) TUFTS UNIVERSITY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, ANNE <hr/> Contributor address; City; State; Zip Code GRAND JUNCTION, CO 81501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMIN ASST		Employer (See Instructions) PETROL LOGIC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, CHRISTINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3370/4629 Rpt: 3373/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, JAMES <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78229	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, JAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, LINDA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUPPORT STAFF		Employer (See Instructions) MACYS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, LINDA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUPPORT STAFF		Employer (See Instructions) MACYS
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, LINDA <hr/> Contributor address; City; State; Zip Code OCALA, FL 34472	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUPPORT STAFF		Employer (See Instructions) MACYS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3371/4629 Rpt: 3374/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, MONROE <hr/> 6 Contributor address; City; State; Zip Code SAINT PETERSBURG, FL 33705	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, PAT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASL INTERPRETER		Employer (See Instructions) SORENSEN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, SHONA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94134	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) ATLASSIAN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, SUSAN <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3372/4629 Rpt: 3375/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, SUSAN	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, SUSAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CHICAGO, IL 60618		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, THOMAS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHMOND, KY 40475		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, THOMAS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RICHMOND, KY 40475		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, THOMAS	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code RICHMOND, KY 40475		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3373/4629 Rpt: 3376/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, BETSY <hr/> 6 Contributor address; City; State; Zip Code WOODWAY, TX 76712	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, BETSY <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, HEATHER <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PARAMEDIC		Employer (See Instructions) CORYELL HEALTH EMS
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, HEATHER <hr/> Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) PARAMEDIC		Employer (See Instructions) CORYELL HEALTH EMS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, LAUREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3374/4629 Rpt: 3377/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDER, MARJORIE <hr/> 6 Contributor address; City; State; Zip Code PAWNEE, OK 74058	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEDHOLM, JOE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REES, LEANNE <hr/> Contributor address; City; State; Zip Code BETHESFA, MD 20814	Amount of Contribution (\$) \$50.24
Principal occupation / Job title (See Instructions) CONCERT PIANIST		Employer (See Instructions) SELF/BOCCA
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REES, LEANNE <hr/> Contributor address; City; State; Zip Code BETHESFA, MD 20814	Amount of Contribution (\$) \$50.24
Principal occupation / Job title (See Instructions) CONCERT PIANIST		Employer (See Instructions) SELF/BOCCA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REESA, LEVY <hr/> Contributor address; City; State; Zip Code JUPITER, FL 33458	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3375/4629 Rpt: 3378/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REESE, JAMES	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code PHOENIXVILLE, PA 29460		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REESE, LENYA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SANTA FE, NM 87505		
Principal occupation / Job title (See Instructions) P.A.C.		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEVE, LISA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code TEMPLE, TX 76502		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEVES, JULIANNE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGAN, THERESA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3376/4629 Rpt: 3379/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGAN, THERESA <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGAS, THEODORA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGAS, THEODORA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGAS, THEODORA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGISTER, KAREN <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3377/4629 Rpt: 3380/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGISTER, KAREN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SANTA MONICA, CA 90402		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGISTER, KAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SANTA MONICA, CA 90402		
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGISTER, KAREN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SANTA MONICA, CA 90402		
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REHM, PATRICIA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SALADO, TX 76571		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REHM, PATRICIA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SALADO, TX 76571		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3378/4629 Rpt: 3381/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REHMET, TAYLOR <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76120	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MECHANIC		9 Employer (See Instructions) LOCKHEED MARTIN
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REHMET, TAYLOR <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76120	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MECHANIC		Employer (See Instructions) LOCKHEED MARTIN
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIBEN, PATRICIA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10010	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICH, LAURIE <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94598	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHARDT, JANET <hr/> Contributor address; City; State; Zip Code PFLUGEVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3379/4629 Rpt: 3382/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHEK, MILT <hr/> 6 Contributor address; City; State; Zip Code HUTTO, TX 78634	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHEK, MILT <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHEK, MILT <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHERT, ANN <hr/> Contributor address; City; State; Zip Code BLANDFORD, MA 01008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) BAYSTATE NOBLE HOSPITAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHERT, ANN <hr/> Contributor address; City; State; Zip Code BLANDFORD, MA 01008	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) BAYSTATE NOBLE HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3380/4629 Rpt: 3383/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHLIN, BARBARA <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MARITAL THERAPIST		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, BETHENY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) BETHENY L REID ASSOCIATES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, GEORGE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10013	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, KEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77090	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, KENNETH <hr/> Contributor address; City; State; Zip Code GROSSE POINTE PARK, MI 48230-1320	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3381/4629 Rpt: 3384/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, SARA <hr/> 6 Contributor address; City; State; Zip Code EARLINGTON, KY 42410	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, SARA <hr/> Contributor address; City; State; Zip Code EARLINGTON, KY 42410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, STEPHANIE <hr/> Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, STEPHEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIVERSITY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, STEPHEN <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3382/4629 Rpt: 3385/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIF, NANCY <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10128	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIFF, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIFF, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIFF, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RICE UNIVERSITY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLEY, STEVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BLUE WILLIAMS, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3383/4629 Rpt: 3386/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLEY, STEVE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) BLUE WILLIAMS, LLC
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, ANTHONY P <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) THEATRE PRODUCTION MANAGER		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, JACKIE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640-8925	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SWIM INSTRUCTOR		Employer (See Instructions) YMCA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, SIDNEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, SIDNEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3384/4629 Rpt: 3387/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, SIDNEY	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77024		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIMAN, SUSAN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code EUGENE, OR 97401		
Principal occupation / Job title (See Instructions) RETIRED SELF		Employer (See Instructions) RETIRED SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIMAN, SUSAN	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code EUGENE, OR 97401		
Principal occupation / Job title (See Instructions) RETIRED SELF		Employer (See Instructions) RETIRED SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIMAN, SUSAN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code EUGENE, OR 97401		
Principal occupation / Job title (See Instructions) RETIRED SELF		Employer (See Instructions) RETIRED SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINES, ELLEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROCKVILLE, MD 20852		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3385/4629 Rpt: 3388/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINGOLD, JONATHAN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) IT DIRECTOR		9 Employer (See Instructions) NTT DATA
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINGOLD, JONATHAN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT DIRECTOR		Employer (See Instructions) NTT DATA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINHARD, HEIDI <hr/> Contributor address; City; State; Zip Code PENOBSCOT, ME 04476	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TOWN GOVERNMENT		Employer (See Instructions) PENOBSCOT ME
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINHART, GAIL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINHART, GAIL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3386/4629 Rpt: 3389/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKE-WALTER, PAM	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75252		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78755		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS	Amount of Contribution (\$) \$21.00
Contributor address; City; State; Zip Code AUSTIN, TX 78755		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code AUSTIN, TX 78755		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78755		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3387/4629 Rpt: 3390/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78755	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78755	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78755	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78755	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78755	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3388/4629 Rpt: 3391/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78755	7 Amount of Contribution (\$) \$21.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REINKEN, JANIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78755	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISER, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$60.40
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISER, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$60.40
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISER, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$60.40
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3389/4629 Rpt: 3392/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISMAN, NIKKI <hr/> 6 Contributor address; City; State; Zip Code BALTIMORE, MD 21231	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISMAN, NIKKI <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21231	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISSMAN, JOAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) JFYNETWORKS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISWERG, CLAIRE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REITER, LOIS <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) VIOLINIST		Employer (See Instructions) ACADEMIE MUSIQUE OF CENTRAL TX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3390/4629 Rpt: 3393/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REITER, LOIS <hr/> 6 Contributor address; City; State; Zip Code GATESVILLE, TX 76528	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) VIOLINIST		9 Employer (See Instructions) ACADEMIE MUSIQUE OF CENTRAL TX
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REITER, LOIS <hr/> Contributor address; City; State; Zip Code GATESVILLE, TX 76528	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VIOLINIST		Employer (See Instructions) ACADEMIE MUSIQUE OF CENTRAL TX
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REMER, DAVID <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REMMEL, PAULA <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER, RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REMMERS, PAGE <hr/> Contributor address; City; State; Zip Code WAUKESHA, WI 53189	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3391/4629 Rpt: 3394/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REMY, LINDA <hr/> 6 Contributor address; City; State; Zip Code BELVEDERE, CA 94920	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) RESEARCH		9 Employer (See Instructions) UCSF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENDINA, LOIS <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33604	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) MOFFITT CANCER CENTER
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENE, DAURESE <hr/> Contributor address; City; State; Zip Code SANTA CLARITA, CA 91355	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENFRO, CHENISSE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SR ADMIN DATA ENTRY		Employer (See Instructions) MAXIMUS INC.
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENFRO, SHEILA <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3392/4629 Rpt: 3395/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENSHAW, SETH <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75206	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) GEARBOX SOFTWARE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENSHAW, SETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) GEARBOX SOFTWARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENTERIA, ERNEST <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) AT&T
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REQUARDT, DENISE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75224	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BUSINESS CONSULTANT		Employer (See Instructions) AETNA CVS HEALTHCARE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDEZ, JAIME <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75217	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JAIME RESENDEZ LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3393/4629 Rpt: 3396/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDEZ, JOE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDEZ, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDEZ, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDEZ, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDEZ, RAY <hr/> Contributor address; City; State; Zip Code SANTA ANA, CA 92707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3394/4629 Rpt: 3397/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDIZ, AIDEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77023	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) UTSA
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDIZ, AIDEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) UTSA
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESENDIZ, AIDEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) UTSA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESOR, ANNE-MARIE <hr/> Contributor address; City; State; Zip Code WILSON, WY 83014	Amount of Contribution (\$) \$50.24
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) QUALCOMM
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESOR, ANNE-MARIE <hr/> Contributor address; City; State; Zip Code WILSON, WY 83014	Amount of Contribution (\$) \$50.24
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) QUALCOMM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3395/4629 Rpt: 3398/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RESTREPO, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MATTHEW RESTREPO
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REVELO, ARISTIDES <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REVES, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REVES, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REVIS, LYNNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3396/4629 Rpt: 3399/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REX, BETH <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$20.22
8 Principal occupation / Job title (See Instructions) CAREGIVER		9 Employer (See Instructions) VISITING ANGELS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REX, BETH <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) VISITING ANGELS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REX, BETH <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) VISITING ANGELS
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REX, BETH <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) VISITING ANGELS
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REX, BETH <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) VISITING ANGELS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3397/4629 Rpt: 3400/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REX, BETH <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CAREGIVER		9 Employer (See Instructions) VISITING ANGELS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, DHARMA <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, GRACE <hr/> Contributor address; City; State; Zip Code HOCKLEY, TX 77447	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) HARRIS COUNTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, MARIO <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) OMNITRACS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES, SARA <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FAMILY SPECIALISTT		Employer (See Instructions) KSTAR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3398/4629 Rpt: 3401/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES-FERRAL, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code TAMPA, FL 33614	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) HEALTHCARE		9 Employer (See Instructions) BAYCARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES-FERRAL, CYNTHIA <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33614	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) BAYCARE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYES-FERRAL, CYNTHIA <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) BAYCARE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYMANN, KATHERINE <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84108	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NATURALIZATION VOTER REGISTRATION COORDINATOR		Employer (See Instructions) LEAGUE OF WOMEN VOTERS - SLC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYMANN, KATHERINE <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84108	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NATURALIZATION VOTER REGISTRATION COORDINATOR		Employer (See Instructions) LEAGUE OF WOMEN VOTERS - SLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3399/4629 Rpt: 3402/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYMANN, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84108	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NATURALIZATION VOTER REGISTRATION COORDINATOR		9 Employer (See Instructions) LEAGUE OF WOMEN VOTERS - SLC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNA, DELMA <hr/> Contributor address; City; State; Zip Code WESLACO, TX 78596	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, CHARLES <hr/> Contributor address; City; State; Zip Code CHESAPEAKE, VA 23321	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, CURT <hr/> Contributor address; City; State; Zip Code CLEVELAND HEIGHTS, OH 44106	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, CURT <hr/> Contributor address; City; State; Zip Code CLEVELAND HEIGHTS, OH 44106	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3400/4629 Rpt: 3403/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, DAVID <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78733	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-3817	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JAKOB <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) 34TH JUDICIAL DISTRICT ATTORNEYS OFFICE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JAKOB <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) 34TH JUDICIAL DISTRICT ATTORNEYS OFFICE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JAKOB <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) 34TH JUDICIAL DISTRICT ATTORNEYS OFFICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3401/4629 Rpt: 3404/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOHN <hr/> 6 Contributor address; City; State; Zip Code AZLE, TX 76020	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) COUNT KEEPERS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOHN <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) COUNT KEEPERS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3402/4629 Rpt: 3405/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, JOSEPH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, LADD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3403/4629 Rpt: 3406/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, LADD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, LADD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, RON <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) CIVITAS ENGINEERING GROUP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, RON <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) CIVITAS ENGINEERING GROUP
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, RONALD <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) CIVITAS ENGINEERING GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3404/4629 Rpt: 3407/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, RONALD <hr/> 6 Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		9 Employer (See Instructions) CIVITAS ENGINEERING GROUP
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, SHARYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, SUSANNA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, SUSANNA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98118	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, TERRI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) LIGHTSTONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3405/4629 Rpt: 3408/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, TERRI <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) LIGHTSTONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOLDS, TERRI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) LIGHTSTONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOSO, BEATRIZ <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DESIGN CONSULTING		Employer (See Instructions) ZIR DESIGN CONSULTING
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOSO, BEATRIZ <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DESIGN CONSULTING		Employer (See Instructions) ZIR DESIGN CONSULTING
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REYNOSO, CARMEN <hr/> Contributor address; City; State; Zip Code JENKS, OK 74037	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3406/4629 Rpt: 3409/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REZABEK, KAREN <hr/> 6 Contributor address; City; State; Zip Code COLUMBIA, MD 21044	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REZABEK, PAT <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REZABEK, PAT <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REZABEK, PAT <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REZZONICO, NILSA <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32835	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) BUYER		Employer (See Instructions) SIEMENS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3407/4629 Rpt: 3410/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHAMES, SANDRA <hr/> 6 Contributor address; City; State; Zip Code ROCHESTER, MI 48309	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHEA, EMILY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHEA, EMILY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHEINLANDER, AMANDA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODE, DAVID <hr/> Contributor address; City; State; Zip Code CARY, NC 27513-3403	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3408/4629 Rpt: 3411/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODE, DAVID <hr/> 6 Contributor address; City; State; Zip Code CARY, NC 27513-3403	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODE, DAVID <hr/> Contributor address; City; State; Zip Code CARY, NC 27513-3403	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODEN, HENRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENERGY MANAGER		Employer (See Instructions) HARRIS COUNTY
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, KELLY <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) FBISD
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, KELLY <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) FBISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3409/4629 Rpt: 3412/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHODES, VALERIE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76306		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHORER, ALEXIS	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code OAKLAND, CA 94618		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SQUARETRADE, INC.
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHORER, ALEXIS	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code OAKLAND, CA 94618		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SQUARETRADE, INC.
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHORER, ALEXIS	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code OAKLAND, CA 94618		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SQUARETRADE, INC.
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHORER, ALEXIS	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code OAKLAND, CA 94618		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SQUARETRADE, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3410/4629 Rpt: 3413/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHORER, ALEXIS <hr/> 6 Contributor address; City; State; Zip Code OAKLAND, CA 94618	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SQUARETRADE, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIAL, MONTY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) INVESTMENTS		Employer (See Instructions) TCJ VENTURES
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIBBENS, KIM <hr/> Contributor address; City; State; Zip Code SAVANNAH, GA 31406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LMT		Employer (See Instructions) KIM RIBBENS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIBEAU, SIDNEY <hr/> Contributor address; City; State; Zip Code BETHESDA MD, MD 20817	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIBEAU, SIDNEY <hr/> Contributor address; City; State; Zip Code BETHESDA MD, MD 20817	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3411/4629 Rpt: 3414/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICCI, SANDRA <hr/> 6 Contributor address; City; State; Zip Code THORNTON, CO 80602-8581	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, AMY <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, ANNA KAY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCE		Employer (See Instructions) SERVICENOW
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, DORY <hr/> Contributor address; City; State; Zip Code WOODSTOCK, VT 05091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, DORY <hr/> Contributor address; City; State; Zip Code WOODSTOCK, VT 05091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3412/4629 Rpt: 3415/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, JAMES <hr/> 6 Contributor address; City; State; Zip Code ROSENBERG, TX 77471	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) RICE & GARDNER CONSULTANTS, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, JEAN <hr/> Contributor address; City; State; Zip Code YORK, PA 17404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RED LION SCHOOLS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, JEAN <hr/> Contributor address; City; State; Zip Code YORK, PA 17404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RED LION SCHOOLS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, JEAN <hr/> Contributor address; City; State; Zip Code YORK, PA 17404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RED LION SCHOOLS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, JENNIFER <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) HR MANAGER		Employer (See Instructions) ACCENTURE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3413/4629 Rpt: 3416/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, JUDAH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78752	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) JUDAH RICE PHOTO
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, LISTON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCHOOL		Employer (See Instructions) XAVIER
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, LISTON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCHOOL		Employer (See Instructions) XAVIER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, MOLLY <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37212	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, SALLY <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3414/4629 Rpt: 3417/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, SALLY <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77304	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, SUSAN <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, SUSAN <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, TERRI <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLIENT ADVOCATE-DONESTIC VOOLENCE		Employer (See Instructions) HOPE'S DOOR NEW BEGINNING CENTER
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, TERRI <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLIENT ADVOCATE-DONESTIC VOOLENCE		Employer (See Instructions) HOPE'S DOOR NEW BEGINNING CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3415/4629 Rpt: 3418/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICH, MONA <hr/> 6 Contributor address; City; State; Zip Code RANCHO PALOS VERDES, CA 90275	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) NEIGHBORHOOD FAM CENTER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICH, MONA <hr/> Contributor address; City; State; Zip Code RANCHO PALOS VERDES, CA 90275	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) NEIGHBORHOOD FAM CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICH, SHARON <hr/> Contributor address; City; State; Zip Code BELMONT, MA 02478	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) FINANCIAL PLANNER		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICH, TIMOTHY <hr/> Contributor address; City; State; Zip Code BOWLING GREEN, KY 42101	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WESTERN KENTUCKY UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARD, CHERYL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3416/4629 Rpt: 3419/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARD, COURTNEY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77014	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SECURITY EVENT STAFF		9 Employer (See Instructions) ANDY FRAIN
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARD, SUSAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) SR QA ENGINEER		Employer (See Instructions) MATLIN SILVER INC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, CYNTHIA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, CYNTHIA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$15.60
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DEBBI <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) DALLAS COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3417/4629 Rpt: 3420/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DEBBI <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75044	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) DALLAS COLLEGE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, EDWARD <hr/> Contributor address; City; State; Zip Code WINDHAM, NH 03087	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, KAREN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, KAREN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, KAREN <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3418/4629 Rpt: 3421/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, KAREN <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, PAUL <hr/> Contributor address; City; State; Zip Code GLENCOE, OK 74032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, CAREN <hr/> Contributor address; City; State; Zip Code COMFORT, TX 78013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, CAREN <hr/> Contributor address; City; State; Zip Code COMFORT, TX 78013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, CARRIE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CARRIE RICHARDSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3419/4629 Rpt: 3422/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, CARRIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-4055		
8 Principal occupation / Job title (See Instructions) PRESIDENT & FOUNDER, CONSULTANCY		9 Employer (See Instructions) CARRIE RICHARDSON DBA CWR STRATEGIES
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, CARRIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CARRIE RICHARDSON
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, CARRIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681-4055		
Principal occupation / Job title (See Instructions) PRESIDENT & FOUNDER, CONSULTANCY		Employer (See Instructions) CARRIE RICHARDSON DBA CWR STRATEGIES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, DL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, GLENN	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) TRAVIS COUNTY COUNSELING AND EDUCATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3420/4629 Rpt: 3423/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, GLENN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78753	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) TRAINER		9 Employer (See Instructions) TRAVIS COUNTY COUNSELING AND EDUCATION
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EXEC DIRECTOR		Employer (See Instructions) LEAP OF JOY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EXEC DIRECTOR		Employer (See Instructions) LEAP OF JOY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, JULIE <hr/> Contributor address; City; State; Zip Code CAMBRIA, CA 93428	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, LISA <hr/> Contributor address; City; State; Zip Code DES PLAINES, IL 60016	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3421/4629 Rpt: 3424/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, RENE <hr/> 6 Contributor address; City; State; Zip Code SAN ANSELMO, CA 94979	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BUSINESS		9 Employer (See Instructions) SYNAPSE INC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, ROBERT <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) LIUNA
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, WENDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXEC ASST		Employer (See Instructions) STATE OF TEXAS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, WENDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXEC ASST		Employer (See Instructions) STATE OF TEXAS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, WILLIAM <hr/> Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3422/4629 Rpt: 3425/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code MILL VALLEY, CA 94941	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, WILLIAM <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, WILLIAM <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON-JONES, JESSE <hr/> Contributor address; City; State; Zip Code DES MOINES, IA 50311	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP MEDICAL DIRECTOR		Employer (See Instructions) BGB GROUP
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHERT, RUTHANN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10027	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3423/4629 Rpt: 3426/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHERT, SCOTT	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code GALVESTON, TX 77551		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DICKINSON ISD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHERT, SCOTT	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GALVESTON, TX 77551		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DICKINSON ISD
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHERT, SCOTT	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code GALVESTON, TX 77551		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DICKINSON ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHEY, JOHN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHE, BETTY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76302		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3424/4629 Rpt: 3427/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, CARL	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code WINDCREST, TX 78239		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, CARL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, CARL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, CARL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHIE, CARL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3425/4629 Rpt: 3428/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHISON, MARIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BULVERDE, TX 78163		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) JUDSON ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMAN, PAUL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BOULDER, CO 80301		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMOND, DARREN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) NETCRACKER
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMOND, DARREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) NETCRACKER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMOND, JOYCE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SPRING, TX 77383		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3426/4629 Rpt: 3429/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHMOND, MARY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code NEWPORT, RI 02840		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, DENISE & BLAIR	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, DENISE & BLAIR	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, DENISE & BLAIR	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, DENISE & BLAIR	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3427/4629 Rpt: 3430/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, DENISE & BLAIR <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, HOWARD <hr/> Contributor address; City; State; Zip Code ROSWELL, GA 30075	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, JEN <hr/> Contributor address; City; State; Zip Code SUMMIT, NJ 07901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3428/4629 Rpt: 3431/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, SUSAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78736		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, SUSAN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78736		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER, SUSAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78736		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER-WUKASH, SUSAN AND GARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHTER-WUKASH, SUSAN AND GARY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3429/4629 Rpt: 3432/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICKE, LACHRYSTAL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code NEW CANEY, TX 77357		
8 Principal occupation / Job title (See Instructions) DIRECTOR OF RESEARCH		9 Employer (See Instructions) HAYNES & COMPANY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICKE, LACHRYSTAL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW CANEY, TX 77357		
Principal occupation / Job title (See Instructions) DIRECTOR OF RESEARCH		Employer (See Instructions) HAYNES & COMPANY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICKENBACKER, JAMES	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) REAL ESTATE DEVELOPER		Employer (See Instructions) SKYLINE DEVELOPMENT, LLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICKMOND, JAMES	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NAPERVILLE, IL 60540		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICKMOND, JAMES	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NAPERVILLE, IL 60540		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3430/4629 Rpt: 3433/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICO, STEPHANIE	7 Amount of Contribution (\$) \$124.00
	6 Contributor address; City; State; Zip Code IMPERIAL BEACH, CA 91932	
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) SAN DIEGO UNIFIED SCHOOL DISTRICT
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDDELL, STEVEN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code EULESS, TX 76040	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ACTIVE NETWORK
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDDELL, STEVEN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code EULESS, TX 76040	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) ACTIVE NETWORK
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDDLE, ANGELA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code EDMOND, OK 73034	
Principal occupation / Job title (See Instructions) INTERIOR DESIGNER		Employer (See Instructions) ETHAN ALLEN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDEOUT, RANSOM	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code ALTADENA, CA 91001	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3431/4629 Rpt: 3434/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDER, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code SAN BRUNO, CA 94066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) CITY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDER, KATHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDGWAY, NANCY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDGWAY, NANCY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDINGS, JAROD <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95819	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) DELTA AIR LINES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3432/4629 Rpt: 3435/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIECK, ROBIN <hr/> 6 Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) TEXAS LIGHTSMITH, INC.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIECK, ROBIN <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) TEXAS LIGHTSMITH, INC.
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIECK, ROBIN <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) TEXAS LIGHTSMITH, INC.
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIEDEL, KAREN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$103.95
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIEDEL, KAREN <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3433/4629 Rpt: 3436/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIEDEL, KAREN <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIEDLER, VALERIE <hr/> Contributor address; City; State; Zip Code ENCINITAS, CA 92024	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIELLO, JOE <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89032	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MAIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIENSTRA, ELLEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIENZIE, CANDIANO <hr/> Contributor address; City; State; Zip Code MILLER PLACE, NY 11764	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) STONY BROOK MEDICINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3434/4629 Rpt: 3437/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIEPE, JAMES RIEPE	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code BURBANK, CA 91505		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFAS, SHARI	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code BERKELEY, CA 94703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFE, PATRICIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GREENVILLE, TX 75401		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFE, PATRICIA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GREENVILLE, TX 75401		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFFAUD, MARCELO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HUNTINGTON, NY 11743-1021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3435/4629 Rpt: 3438/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFFAUD, MARCELO	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HUNTINGTON, NY 11743-1021		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFFAUD, MARCELO	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HUNTINGTON, NY 11743-1021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIFFAUD, MARCELO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUNTINGTON, NY 11743-1021		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGBY, SUSAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WIMBERLEY, TX 78676		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGIO, MILLA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code VERNON, CT 06066		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TRINITY COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3436/4629 Rpt: 3439/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77044-2672	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044-2672	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3437/4629 Rpt: 3440/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3438/4629 Rpt: 3441/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, CAROLYN P. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGGS, RIMA <hr/> Contributor address; City; State; Zip Code PORT CHARLOTTE, FL 33948	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGIK, CHARLETH <hr/> Contributor address; City; State; Zip Code FOREST GROVE, OR 97116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGIK, CHARLETH <hr/> Contributor address; City; State; Zip Code FOREST GROVE, OR 97116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3439/4629 Rpt: 3442/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGOULOT, LESLIE <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGOULOT, LESLIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGOULOT, LESLIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGOULOT, LESLIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIGOULOT, LESLIE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3440/4629 Rpt: 3443/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIKE, RAY <hr/> 6 Contributor address; City; State; Zip Code MANSFIELD, TX 76063	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIKE, RAY <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, CAROLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INFORMATION TECHNOLOGY		Employer (See Instructions) CAROLYN RILEY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, CECILIA <hr/> Contributor address; City; State; Zip Code FORT DAVIS, TX 79734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, CECILIA <hr/> Contributor address; City; State; Zip Code FORT DAVIS, TX 79734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3441/4629 Rpt: 3444/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, DARBY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, DARBY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, JOSEPH <hr/> Contributor address; City; State; Zip Code SUISUN CITY, CA 94585	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, JOSEPH <hr/> Contributor address; City; State; Zip Code SUISUN CITY, CA 94585	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, MADELINE <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20009	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) REINGOLD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3442/4629 Rpt: 3445/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, MADELINE <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20009	7 Amount of Contribution (\$) \$2.86
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) REINGOLD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, PATRICK <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, PATRICK <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RILEY, SUSAN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR SPECIALIST		Employer (See Instructions) ADP, LLC
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIMKUS, CHRISTIAN <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ANALYTICS MANAGER		Employer (See Instructions) WELLS FARGO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3443/4629 Rpt: 3446/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINALDI, MARGARET <hr/> 6 Contributor address; City; State; Zip Code LANGLEY, WA 98260	7 Amount of Contribution (\$) \$7.96
8 Principal occupation / Job title (See Instructions) TEACHER/THERAPIST		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINALDI, NICOLA <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINALDI, NICOLA <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINCON, ALMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CHIEF OF ADMINISTRATION		Employer (See Instructions) HARRIS COUNTY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINCON, ALMA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CHIEF OF ADMINISTRATION		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3444/4629 Rpt: 3447/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINCON, ALMA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77089		
8 Principal occupation / Job title (See Instructions) CHIEF OF ADMINISTRATION		9 Employer (See Instructions) HARRIS COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINDOCK, KATHRYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BREINIGSVILLE, PA 18031		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINEHART, BETTYE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PORTLAND, OR 97220		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINER, MIRIAM	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ARLINGTON, VA 22207		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RING, CHRISTINE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77030		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3445/4629 Rpt: 3448/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RINN, DONNA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIORDAN, DEBORAH	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code BANDERA, TX 78003		
Principal occupation / Job title (See Instructions) PROCESSOR		Employer (See Instructions) ACCENTURE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIOS, ARTURO	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HAUSER CLINIC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIOS, CRYSTAL	Amount of Contribution (\$) \$124.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) DIRECTOR OF SBOE ENGAGEMENT		Employer (See Instructions) CHARTER SCHOOLS NOW PAC
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIPPETOE, MAX	Amount of Contribution (\$) \$32.00
Contributor address; City; State; Zip Code DALLAS, TX 75206		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3446/4629 Rpt: 3449/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RISINGER, LINDA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code COVINA, CA 91723		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RISK, NANCY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78767		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITCHIE, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3447/4629 Rpt: 3450/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3448/4629 Rpt: 3451/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITENBAUGH, CHERYL <hr/> 6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419-5256	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITSHER, DIANE <hr/> Contributor address; City; State; Zip Code NORWELL, MA 02061	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITSHER, DIANE <hr/> Contributor address; City; State; Zip Code NORWELL, MA 02061	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITTER, P. M. <hr/> Contributor address; City; State; Zip Code HICKORY, NC 28601	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RITTER, P. M. <hr/> Contributor address; City; State; Zip Code HICKORY, NC 28601	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3449/4629 Rpt: 3452/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, IRMA <hr/> Contributor address; City; State; Zip Code CENTEREACH, NY 11720	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, JOE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, JUDITH <hr/> Contributor address; City; State; Zip Code SEA CLIFF, NY 11579	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CAREFIRST HOME SOLUTIONS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, SANDY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) TEXAS LOTTERY COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3450/4629 Rpt: 3453/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, SANDY <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78415	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SUPERVISOR		9 Employer (See Instructions) TEXAS LOTTERY COMMISSION
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, TINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERA, TINA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERS, CONSTANCE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVERS, CONSTANCE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3451/4629 Rpt: 3454/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVIERA, NICOLE <hr/> 6 Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BOUTIQUE MANAGER		9 Employer (See Instructions) CHRISTIAN LOUBOUTIN
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVLIN, SARAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) TEXAS AFT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIVOIRA, DAVID <hr/> Contributor address; City; State; Zip Code KNOXVILLE E, TN 37922	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIZZO, MARIA <hr/> Contributor address; City; State; Zip Code MEDFORD, OR 97504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROACH, LINETTE <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77377	Amount of Contribution (\$) \$57.38
Principal occupation / Job title (See Instructions) EXTERNAL RELATIONS		Employer (See Instructions) BLACK HEALTH MATTERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3452/4629 Rpt: 3455/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROACH, PAM <hr/> 6 Contributor address; City; State; Zip Code CHOCTAW, OK 73020	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) FEMA
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROB, LILIEHOLM <hr/> Contributor address; City; State; Zip Code HAMPDEN, ME 04444	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF MAINE
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROB, LILIEHOLM <hr/> Contributor address; City; State; Zip Code HAMPDEN, ME 04444	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF MAINE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBB, BETH W <hr/> Contributor address; City; State; Zip Code LOS GATOS, CA 95030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS, DENNIS I <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3453/4629 Rpt: 3456/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS, EDITH <hr/> 6 Contributor address; City; State; Zip Code GRAND BLANC, MI 48439	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS, SARAH <hr/> Contributor address; City; State; Zip Code BAYSIDE, TX 78340	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS, SARAH <hr/> Contributor address; City; State; Zip Code BAYSIDE, TX 78340	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CREATIVE DIRECTOR		Employer (See Instructions) DANILLER + COMPANY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS-ROTH, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN MATEO, CA 94403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3454/4629 Rpt: 3457/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS-ROTH, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code SAN MATEO, CA 94403	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBBINS-ROTH, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN MATEO, CA 94403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERSON, EVELYN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERSON, KAREN <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERSON, TERESA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) FORSHEY & PROSTOK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3455/4629 Rpt: 3458/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, BEVERLY <hr/> 6 Contributor address; City; State; Zip Code PROSPER, TX 75078	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, BEVERLY <hr/> Contributor address; City; State; Zip Code PROSPER, TX 75078	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, CARLA <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, CARLA <hr/> Contributor address; City; State; Zip Code ESCONDIDO, CA 92029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, CAROL <hr/> Contributor address; City; State; Zip Code LAKE FOREST, CA 92630	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3456/4629 Rpt: 3459/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, CAROLE <hr/> 6 Contributor address; City; State; Zip Code LAKEWOOD, CA 90712	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, DIANE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) IT PROJECT DELIVERY MANAGER		Employer (See Instructions) ESSILOR USA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, DIANNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATA MANAGER/ANALYST		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, DIANNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) DATA MANAGER/ANALYST		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, DUANE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) VA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3457/4629 Rpt: 3460/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, DUANE <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REGISTERED NURSE		9 Employer (See Instructions) VA
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, GLORIA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76301	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, KAREN <hr/> Contributor address; City; State; Zip Code OXFORD, CT 06478	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, KENDRICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) N/A
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, MARIANNE <hr/> Contributor address; City; State; Zip Code LONE OAK, TX 75453	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3458/4629 Rpt: 3461/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code LONE OAK, TX 75453	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, MARIANNE <hr/> Contributor address; City; State; Zip Code LONE OAK, TX 75453	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, NATHAN <hr/> Contributor address; City; State; Zip Code GIG HARBOR, WA 98335	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CONNELLY LAW OFFICES
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, NATHAN <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SAENTX
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, RICHARD <hr/> Contributor address; City; State; Zip Code WINSTON SALEM, NC 27104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3459/4629 Rpt: 3462/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, RICK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		9 Employer (See Instructions) MEMORIAL HERMANN
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, RICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) MEMORIAL HERMANN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, SEAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) ROBERTS MARKLAND LLP
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, THOMAS <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27514	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) COFFEE ROASTER		Employer (See Instructions) JOE VAN GOGH, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, VERA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3460/4629 Rpt: 3463/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, VERA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76119	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, VERA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, VERA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS, VERA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS HAVARD, KRISTY <hr/> Contributor address; City; State; Zip Code LA PORTE, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) DEER PARK.ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS HAVARD, KRISTY <hr/> 6 Contributor address; City; State; Zip Code LA PORTE, TX 77571	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) DEER PARK.ISD
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS JR., TREVOR <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95134	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) AMAZON
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS-MILLER, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTS-MILLER, JIMMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSHAW, SUSAN <hr/> Contributor address; City; State; Zip Code BOYD, TX 76023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3462/4629 Rpt: 3465/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSHAW, SUSAN <hr/> 6 Contributor address; City; State; Zip Code BOYD, TX 76023	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, CAROLE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, CAROLE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON, VICTORIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERTSON-SMITH, ROSEMARY <hr/> Contributor address; City; State; Zip Code PINEVILLE, LA 71360	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3463/4629 Rpt: 3466/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, ANTHONY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76137	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) BANK OF AMERICA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, ASHLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES & SERVICES ASSOCIATE		Employer (See Instructions) MARRIOTT
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, ASHLEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SALES & SERVICES ASSOCIATE		Employer (See Instructions) MARRIOTT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BARRETT <hr/> Contributor address; City; State; Zip Code WEST LAFAYETTE, IN 47996	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BARRETT <hr/> Contributor address; City; State; Zip Code WEST LAFAYETTE, IN 47996	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3464/4629 Rpt: 3467/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BETTEANN <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BEVERLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BRETT <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, BRETT <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, CLAUDIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3465/4629 Rpt: 3468/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, CLAUDIA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, CORDELIA <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WESTWATER COMPANY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, DARLENE <hr/> Contributor address; City; State; Zip Code DESOTO, TX 75115	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3466/4629 Rpt: 3469/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, EDDIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE INVESTOR		9 Employer (See Instructions) EDDIE ROBINSON
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, JANEICE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ART TEACHER		Employer (See Instructions) CONROE ISD
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, JANEICE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77355	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ART TEACHER		Employer (See Instructions) CONROE ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, JEAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, JEAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3467/4629 Rpt: 3470/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, JEAN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76137	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, KIMMY <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) WILSON ELSEER MOSKOWITZ EDELMAN & DICKER, LLP
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, KIMMY <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) WILSON ELSEER MOSKOWITZ EDELMAN & DICKER, LLP
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, KIMMY <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) WILSON ELSEER MOSKOWITZ EDELMAN & DICKER, LLP
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, KIMMY <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) WILSON ELSEER MOSKOWITZ EDELMAN & DICKER, LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3468/4629 Rpt: 3471/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, KIMMY <hr/> 6 Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) WILSON ELSER MOSKOWITZ EDELMAN & DICKER, LLP
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, LARISSA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) MEMORIAL HERMANN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, LINDA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, LINDA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, LINDA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3469/4629 Rpt: 3472/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, LINDA <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, LINDA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, MICHAEL <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21218	Amount of Contribution (\$) \$1.36
Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		Employer (See Instructions) AURA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, MICHAEL <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21218	Amount of Contribution (\$) \$1.36
Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		Employer (See Instructions) AURA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, MONIKA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) IRVING ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3470/4629 Rpt: 3473/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, NEIL <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023-3652	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR, PLANNING AND CAMPAIGN		9 Employer (See Instructions) SOUTHERN METHODIST UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, NELSON <hr/> Contributor address; City; State; Zip Code VASHON, WA 98070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, PATRICK <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, PATRICK <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SALLY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3471/4629 Rpt: 3474/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SALLY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code GALVESTON, TX 77550		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UTMB
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SALLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SALLY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SALLY	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SALLY	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code GALVESTON, TX 77550		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3472/4629 Rpt: 3475/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SAUNDRA <hr/> 6 Contributor address; City; State; Zip Code EAST POINT, GA 30344	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SHERRIE <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) HOUSTON ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SIMON <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) PT PRODUCTS AND SERVICES, INC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, SIMON <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) PT PRODUCTS AND SERVICES, INC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, STEPHEN <hr/> Contributor address; City; State; Zip Code LOUISVILLE, KY 40218	Amount of Contribution (\$) \$56.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3473/4629 Rpt: 3476/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, STEPHEN	7 Amount of Contribution (\$) \$56.00
6 Contributor address; City; State; Zip Code LOUISVILLE, KY 40218		
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, VICTORIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MASSAPEQUA PARK, NY 11762		
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) GE VERNOVA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, WAYNE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code EAGLE RIVER, AK 99577		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON-BEDFORD, JASMINE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LOS ANGELES, CA 90016		
Principal occupation / Job title (See Instructions) TRADE SHOW COORDINATOR		Employer (See Instructions) FUJIFILM
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON-MOSHER, AVI	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code NEW YORK, NY 10040-3756		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) D.E. SHAW RESEARCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3474/4629 Rpt: 3477/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBISON, DENISE <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBISON, KIRK <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CHAIRMAN		Employer (See Instructions) PIZZA PROPERTIES INC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBSON, RAMONA <hr/> Contributor address; City; State; Zip Code YELM, WA 98597	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBUS, PATRICIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) PEDIATRIC DENTAL PROFESSIONALS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHA, MARY ESTHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3475/4629 Rpt: 3478/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHA, MARY ESTHER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHE, BRENDA <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHE, BRENDA <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHE, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHE, ERIN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386-4501	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) MCKESSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3476/4629 Rpt: 3479/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHEN, SHARI	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) VETERANS HEALTH ADMINISTRATION
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCHEN, SHARI	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) VETERAN'S HEALTH ADMINISTRATION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKMAN, CHARLIE	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code PORTLAND, OR 97213		
Principal occupation / Job title (See Instructions) OPERATIONAL STRATEGY		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKMAN, CHARLIE	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code PORTLAND, OR 97213		
Principal occupation / Job title (See Instructions) OPERATIONAL STRATEGY		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKMAN, JUDI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3477/4629 Rpt: 3480/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKOW, KAREN	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code SALISBURY, VT 05769		
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODABOUGH, CAROLYN	Amount of Contribution (\$) \$15.60
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODABOUGH, CAROLYN	Amount of Contribution (\$) \$15.60
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODDY, MADISON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALLEN, TX 75013		
Principal occupation / Job title (See Instructions) SALES PROJECT MGR		Employer (See Instructions) ALTIUM
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODEN, NICHOLAS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SCOTCH PLAINS, NJ 07076		
Principal occupation / Job title (See Instructions) TOXICOLOGIST		Employer (See Instructions) IES ENGINEERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3478/4629 Rpt: 3481/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODEN, NICHOLAS <hr/> 6 Contributor address; City; State; Zip Code SCOTCH PLAINS, NJ 07076	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TOXICOLOGIST		9 Employer (See Instructions) IES ENGINEERS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, CHRISTI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) REPUBLIC TITLE CO
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, CHRISTI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) REPUBLIC TITLE CO
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, JANICE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) QUARLES & BRADY LLP
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, JANICE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) QUARLES & BRADY LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3479/4629 Rpt: 3482/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, KENYA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75201	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) HUMAN RESOURCES		9 Employer (See Instructions) FIDELITY INVESTMENTS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODICH, TANYA <hr/> Contributor address; City; State; Zip Code GWYNN OAK, MD 21207-3853	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODICH, TANYA <hr/> Contributor address; City; State; Zip Code GWYNN OAK, MD 21207-3853	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODICH, TANYA <hr/> Contributor address; City; State; Zip Code GWYNN OAK, MD 21207-3853	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODICH, TANYA <hr/> Contributor address; City; State; Zip Code GWYNN OAK, MD 21207-3853	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3480/4629 Rpt: 3483/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODMAN, JIM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) RODMAN LAW OFFICE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODMAN, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RODMAN LAW OFFICE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODNICK, AMIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUES KAIWA, WILLIAM <hr/> Contributor address; City; State; Zip Code LIHUE, HI 96766	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ALVARO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3481/4629 Rpt: 3484/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ALVARO <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059-3123	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ANGEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, AYLIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, BRITTANY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79928	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, CARMEN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3482/4629 Rpt: 3485/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, CARMEN <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, DANIEL <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, DANIEL <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, DANIEL <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, DANIEL <hr/> Contributor address; City; State; Zip Code FLORESVILLE, TX 78114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3483/4629 Rpt: 3486/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, DANIEL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code FLORESVILLE, TX 78114		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, DIANE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ELSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) HHSC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CHATSWORTH, CA 91311		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CHATSWORTH, CA 91311		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3484/4629 Rpt: 3487/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH <hr/> 6 Contributor address; City; State; Zip Code CHATSWORTH, CA 91311	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH <hr/> Contributor address; City; State; Zip Code CHATSWORTH, CA 91311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH <hr/> Contributor address; City; State; Zip Code CHATSWORTH, CA 91311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH <hr/> Contributor address; City; State; Zip Code CHATSWORTH, CA 91311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GARTH <hr/> Contributor address; City; State; Zip Code CHATSWORTH, CA 91311	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3485/4629 Rpt: 3488/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GILBERTO <hr/> 6 Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33411	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, GISSETTE <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ISIAIAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR DIGITAL STRATEGIST		Employer (See Instructions) MANDATE MEDIA
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ISIAIAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SENIOR DIGITAL STRATEGIST		Employer (See Instructions) MANDATE MEDIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3486/4629 Rpt: 3489/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JAMES	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77062		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JAMES	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JAMES	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JESSE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JESSE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76244		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3487/4629 Rpt: 3490/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, JOSE I <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90012	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) VP OF TALENT RELATIONS		9 Employer (See Instructions) NA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, LORAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) CLEARDAY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MANUEL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79928	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) GOV. AFFAIRS		Employer (See Instructions) EL PASO CHAMBER
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MANUEL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79928	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GOV. AFFAIRS		Employer (See Instructions) EL PASO CHAMBER
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MANUEL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79928	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) GOV. AFFAIRS		Employer (See Instructions) EL PASO CHAMBER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3488/4629 Rpt: 3491/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MARC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78701		
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF-EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MARC A.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF-EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MARC A.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF-EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MARC A.	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619		
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF-EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MARICELA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BLOOMFIELD, NJ 07003		
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3489/4629 Rpt: 3492/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SCOTT & WHITE CLINIC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MONICA <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MONICA <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, MONICA <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, NANCY <hr/> Contributor address; City; State; Zip Code CONROE, TX 77385	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3490/4629 Rpt: 3493/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, NORMA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, NORMA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, OSCAR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TX ASSN OF BROADCASTERS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, PABLO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77017	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) LAW OFFICES OF PABLO RODRIGUEZ PLLC
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, PAUL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3491/4629 Rpt: 3494/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, PAUL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75244	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, PHILIP <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RACHEL <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RACHEL <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RACHEL <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91106	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3492/4629 Rpt: 3495/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RACHEL <hr/> 6 Contributor address; City; State; Zip Code PASADENA, CA 91106	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RACHEL <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91106	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RACHEL <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91106	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RAYMOND <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) LPT REALTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RC <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3493/4629 Rpt: 3496/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RC <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, RC <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, ROBERT <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, SAHARA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, SAMUEL <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) GOVCIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3494/4629 Rpt: 3497/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, SUSAN <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, SUSAN <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, TERI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, TERI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, TERI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3495/4629 Rpt: 3498/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, VIRGINIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77064		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) DOL
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIQUEZ, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FRESNO, CA 93728		
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) IHSS
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIQUEZ, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FRESNO, CA 93728		
Principal occupation / Job title (See Instructions) CARE PROVIDER		Employer (See Instructions) IHSS
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIQUEZ, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FRESNO, CA 93728		
Principal occupation / Job title (See Instructions) CARE PROVIDER		Employer (See Instructions) IHSS
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIQUEZ, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FRESNO, CA 93728		
Principal occupation / Job title (See Instructions) HEALTH CARE		Employer (See Instructions) IHSS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3496/4629 Rpt: 3499/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODY, VIVIAN <hr/> 6 Contributor address; City; State; Zip Code PUYALLUP, WA 98371	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROEBUCK, ANDREI <hr/> Contributor address; City; State; Zip Code JORDAN, NY 13080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROEBUCK, ANDREI <hr/> Contributor address; City; State; Zip Code JORDAN, NY 13080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGAT, EDIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGEN, LAURIE <hr/> Contributor address; City; State; Zip Code FLORAL PARK, NY 11005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3497/4629 Rpt: 3500/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGEN, LAURIE <hr/> 6 Contributor address; City; State; Zip Code FLORAL PARK, NY 11005	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, ANDREI <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) BLACKBAUD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, BARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CACI NSS INC.
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, BARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CACI NSS INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, CARLA <hr/> Contributor address; City; State; Zip Code CHINO VALLEY, AZ 86323	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3498/4629 Rpt: 3501/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, CHERYL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112	7 Amount of Contribution (\$) \$20.20
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) ILTEXAS
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GAIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GAIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GARY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3499/4629 Rpt: 3502/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3500/4629 Rpt: 3503/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, GLENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JAMES <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JAMES <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3501/4629 Rpt: 3504/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JE'RELL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) HARRS COUNTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JE'RELL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRS COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, KATHRYN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, KENDEL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code KELLER, TX 76248		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) UNT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, KIM	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code NORTH SIOUX CITY, SD 57049-0517		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3502/4629 Rpt: 3505/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, LINDA <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NONE		9 Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, LINDA <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, LINDA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3503/4629 Rpt: 3506/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, NANCY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, NANCY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, NONIE <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, THOMAS <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55403	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) WEB DESIGNER		Employer (See Instructions) AMBIENT CONSULTING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGOTZKE, CYARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3504/4629 Rpt: 3507/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROHAN, ALEXIS <hr/> 6 Contributor address; City; State; Zip Code DEKALB, IL 60115	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROHDE, CARL <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22314	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) GOVERNMENT INFORMATION SPECIALIST		Employer (See Instructions) BUREAU OF LAND MANAGEMENT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROHLFING, MINERVA <hr/> Contributor address; City; State; Zip Code LANTANA, FL 33462-1875	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROITMAN-BOOTHE, MARCIA <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROJAS, ANTHONY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CITY OF FW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3505/4629 Rpt: 3508/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROJAS, MELISSA <hr/> 6 Contributor address; City; State; Zip Code DONNA, TX 78537	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) ME
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROKES, SUSAN <hr/> Contributor address; City; State; Zip Code SANTA FE, TX 77517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) FORT BEND
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROKES, SUSAN <hr/> Contributor address; City; State; Zip Code SANTA FE, TX 77517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) FORT BEND
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROKES, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROKES, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3506/4629 Rpt: 3509/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROKOFF, CAROL <hr/> 6 Contributor address; City; State; Zip Code BETHESDA, MD 20817	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) GANNETT FLEMING
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROKOFF, CAROL <hr/> Contributor address; City; State; Zip Code BETHESDA, MD 20817	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) GANNETT FLEMING
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLF, BRITTANY <hr/> Contributor address; City; State; Zip Code TOWSON, MD 21286	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) RK&K
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLF, BRITTANY <hr/> Contributor address; City; State; Zip Code TOWSON, MD 21286	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) RK&K
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLF, KEITH <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3507/4629 Rpt: 3510/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLFES, KEVIN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLFES, KEVIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLKE, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLKE, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLKE, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN TX, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3508/4629 Rpt: 3511/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLLINS, GUY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code WIMBERLEY, TX 78676-3435		
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLLINS, GUY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WIMBERLEY, TX 78676-3435		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLLINS, MARTIN AND GENN	Amount of Contribution (\$) \$23.00
Contributor address; City; State; Zip Code LACEY, WA 98503		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLSTON, PATRICIA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MOUNT TABOR, NJ 07878		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMAN, ELIZABETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW YORK, NY 10075		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3509/4629 Rpt: 3512/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANO, ROBERT <hr/> 6 Contributor address; City; State; Zip Code ROCKVILLE, MD 20850-5955	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANO, ROBERT <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20850-5955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANO, ROBERT <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20850-5955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANO, ROBERT <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20850-5955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANS, SUSAN <hr/> Contributor address; City; State; Zip Code STOWE, VT 05672	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3510/4629 Rpt: 3513/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMANS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code STOWE, VT 05672	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMAR, GEORGE <hr/> Contributor address; City; State; Zip Code BRONX, NY 10463	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, MELBA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MARKETING DIRECTOR		Employer (See Instructions) GONZALEZ-DELAGARZA ENGINEERING
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, OLGA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77065	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SR. CRA		Employer (See Instructions) IQVIA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, RAMON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76101	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) RAMON ROMERO CAMPAIGN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3511/4629 Rpt: 3514/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, RHYS <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DIRECTOR, TECHNICAL CONSULTING		9 Employer (See Instructions) OXFORD GLOBAL RESOURCES
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, ROBERT N <hr/> Contributor address; City; State; Zip Code HOUSTON TX, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, ROBERT N <hr/> Contributor address; City; State; Zip Code HOUSTON TX, TX 77080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, TAYLOR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CAIN & SKARNULIS PLLC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, TAYLOR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CAIN & SKARNULIS PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3512/4629 Rpt: 3515/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO, VICTOR <hr/> 6 Contributor address; City; State; Zip Code SANTA MARIA, CA 93458	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) ELECTRICIAN, PHYSICAL THERAPIST		9 Employer (See Instructions) WICKS SOLAR, INC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMERO PAUL, TERRY <hr/> Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91423	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) FINE ARTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMIG, J. <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79109	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMMAN, ADAM <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTMB
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMMEL, NANCY <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85730	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3513/4629 Rpt: 3516/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMNEY, JESSICA <hr/> 6 Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROMO, LAWRENCE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78253	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONDERO DE MOSIER, ROBERTO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONDEROS, STEPHEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ATLASSIAN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONDEROS, STEPHEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ATLASSIAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3514/4629 Rpt: 3517/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONDEROS, STEPHEN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78753		
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) ATLASSIAN
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONDEROS, STEPHEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) ATLASSIAN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONNING, THOMAS	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EAST BETHEL, MN 55011-4758		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RONQUILLO, MARCOS	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code DALLAS, TX 75238		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOF, PAUL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code RENTON, WA 98055		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3515/4629 Rpt: 3518/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOKE, SUSAN <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOKER, JACK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BECHTEL CORPORATION
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOKER, VICKI <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89169	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOKER, VICKI <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89169	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOS, CAROLYN <hr/> Contributor address; City; State; Zip Code OLYMPIA, WA 98502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENERGY ENGINEER		Employer (See Instructions) WSU ENERGY PROG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3516/4629 Rpt: 3519/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOS, CAROLYN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code OLYMPIA, WA 98502		
8 Principal occupation / Job title (See Instructions) ENERGY ENGINEER		9 Employer (See Instructions) WSU ENERGY PROG
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOS, CAROLYN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code OLYMPIA, WA 98502		
Principal occupation / Job title (See Instructions) ENERGY ENGINEER		Employer (See Instructions) WSU ENERGY PROG
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOSA, KATHRYN	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code HOUSTON, TX 77058		
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROOT, ERIC	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ROSE VALLEY, PA 19086		
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) CONDUENT
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROQUEMORE, SUZANNE AND WADE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3517/4629 Rpt: 3520/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSCH, ELEANOR <hr/> 6 Contributor address; City; State; Zip Code EL CERRITO, CA 94530	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSCH, ELEANOR <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSCHKE, SHIRLEY <hr/> Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, DENISE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JACKSON WALKER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, ERSKINE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76018	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3518/4629 Rpt: 3521/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, EVELYN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75209	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) CARDINAL INVESTMENT COMPANY INC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, JAMES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, JANETTE <hr/> Contributor address; City; State; Zip Code DENVER, CO 80222	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMIN SECRETARY		Employer (See Instructions) UNIVERSITY OF COLORADO HOSPITAL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, JANETTE <hr/> Contributor address; City; State; Zip Code DENVER, CO 80222	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ADMIN SECRETARY		Employer (See Instructions) UNIVERSITY OF COLORADO HOSPITAL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, JANETTE <hr/> Contributor address; City; State; Zip Code DENVER, CO 80222	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ADMIN SECRETARY		Employer (See Instructions) UNIVERSITY OF COLORADO HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3519/4629 Rpt: 3522/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, JULIE <hr/> 6 Contributor address; City; State; Zip Code VACAVILLE, CA 95687-5524	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PORTFOLIO MANAGER		9 Employer (See Instructions) CISCO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, JUSTIN <hr/> Contributor address; City; State; Zip Code LAKELAND, FL 33813	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) STARBUCKS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LEILANI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LEILANI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LEILANI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3520/4629 Rpt: 3523/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LEILANI	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78753		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LEILANI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LEILANI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78753		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LINDA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code RENO, NV 89509		
Principal occupation / Job title (See Instructions) SCHOOL NURSE		Employer (See Instructions) WASHOE COUNTY SCHOOL DISTRICT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RENO, NV 89509		
Principal occupation / Job title (See Instructions) SCHOOL NURSE		Employer (See Instructions) WASHOE COUNTY SCHOOL DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3521/4629 Rpt: 3524/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, MARJORIE <hr/> 6 Contributor address; City; State; Zip Code CORNING, NY 14830	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, SHARON <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, SHARON <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76501-1555	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, SHARON <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE, TONI <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75241	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3522/4629 Rpt: 3525/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEBERRY, VON <hr/> 6 Contributor address; City; State; Zip Code CHEYENNE, WY 82009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MEALS ON WHEELS		9 Employer (See Instructions) MEALS ON WHEELS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEBORROUGH, ELIZABETH <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEMAN, STUART <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02116	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SANEBOX
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEMAN, STUART <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02116	Amount of Contribution (\$) \$31.25
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SANEBOX
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEN, DONNA <hr/> Contributor address; City; State; Zip Code JERICHO, NY 11753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3523/4629 Rpt: 3526/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEN, GARY <hr/> 6 Contributor address; City; State; Zip Code MISSION VIEJO, CA 92692	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEN, ILENE <hr/> Contributor address; City; State; Zip Code FLORAL PARK, NY 11005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BUSINESS EXECUTIVE		Employer (See Instructions) HAMBURGER WOOLEN CO.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEN, JOEL <hr/> Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) SELF
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEN, JOEL <hr/> Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHIATRIST		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSEN, LARA <hr/> Contributor address; City; State; Zip Code PORTLAND, ME 04102	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) MEDICAL ECONOMIST ANALYST		Employer (See Instructions) MARTINS POINT HEALTH CARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3524/4629 Rpt: 3527/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBAUM, NOEL R <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBAUM, NOEL R <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBAUM, NOEL R <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CITY OF DALLAS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CITY OF DALLAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3525/4629 Rpt: 3528/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, HOWARD	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code NEW ALBANY, OH 43054		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, MARCI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) ATTORNEY/VOLUNTEER		Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, MARCI	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) ATTORNEY/VOLUNTEER		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, MARCI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) ATTORNEY/VOLUNTEER		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, MARCI	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) ATTORNEY/VOLUNTEER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3526/4629 Rpt: 3529/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERG, SHERRY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code VENTURA, CA 93004		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERGER, KYLA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALEDO, TX 76008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBERGER, KYLA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ALEDO, TX 76008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBLATT, JESSICA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139		
Principal occupation / Job title (See Instructions) MEDIA DESIGNER		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBLATT, JESSICA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02139		
Principal occupation / Job title (See Instructions) MEDIA DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3527/4629 Rpt: 3530/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBLOOM, ALVIN <hr/> 6 Contributor address; City; State; Zip Code TARZANA, CA 91356	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENBLUM, SYDNEY <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48108	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SUPPORT STAFF		Employer (See Instructions) HIGH SCHOOL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENHOUSE, SUSANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONPROFIT		Employer (See Instructions) NJOP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENSTEIN, STUART <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95061	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, JOHN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MORGAN LEWIS LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3528/4629 Rpt: 3531/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, JOHN <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94707	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) MORGAN LEWIS LLP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, JOHN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) MORGAN LEWIS LLP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, MICHAEL <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, MICHAEL <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, MICHAEL <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSENTHAL, SUSAN <hr/> 6 Contributor address; City; State; Zip Code BOSTON, MA 02115	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSERO, MARISOL <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSERO, MARISOL <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSHANFEKR, ALI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CONSULTING		Employer (See Instructions) CASCADE CIVIL SERVICES
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSKOS, MARIAN <hr/> Contributor address; City; State; Zip Code GLENDDORA, CA 91741	Amount of Contribution (\$) \$13.54
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3530/4629 Rpt: 3533/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSMOND, POLLY <hr/> 6 Contributor address; City; State; Zip Code OLYMPIA, WA 98512	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSPIERSKI, CAROLYN <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) EXXONMOBIL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, ALAN <hr/> Contributor address; City; State; Zip Code IOWA CITY, IA 52240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF IOWA
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, CAROLYN <hr/> Contributor address; City; State; Zip Code OVILLA, TX 75154	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, CAROLYN <hr/> Contributor address; City; State; Zip Code OVILLA, TX 75154	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3531/4629 Rpt: 3534/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, CAROLYN MIRACLE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005-4016	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, CAROLYN MIRACLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-4016	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, COLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, DAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78217	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, DONNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3532/4629 Rpt: 3535/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, MARY <hr/> 6 Contributor address; City; State; Zip Code FRESNO, TX 77545	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, MARY <hr/> Contributor address; City; State; Zip Code FRESNO, TX 77545	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, SARA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) STUDENT
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, TOM <hr/> Contributor address; City; State; Zip Code STERLING HEIGHTS, MI 48312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) VMWARE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, TOM <hr/> Contributor address; City; State; Zip Code STERLING HEIGHTS, MI 48312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) VMWARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3533/4629 Rpt: 3536/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, TONI <hr/> 6 Contributor address; City; State; Zip Code WAINSCOTT, NY 11975	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSEN, ROGER <hr/> Contributor address; City; State; Zip Code CUMBERLAND, ME 04021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSEN, ROGER <hr/> Contributor address; City; State; Zip Code CUMBERLAND, ME 04021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSEN, RONALD <hr/> Contributor address; City; State; Zip Code SARATOGA, CA 95070-5509	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PALO ALTO MEDICAL FOUNDATION
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSETTO, MINDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3534/4629 Rpt: 3537/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSMAN, AMY	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code CORVALLIS, OR 97330		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSSMANN, CAITLIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FAIRFAX, VA 22031-1127		
Principal occupation / Job title (See Instructions) PRODUCER		Employer (See Instructions) AARP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSTOV, JAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KENTFIELD, CA 94904		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTENBERG, ANITA	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code ALBANY, CA 94706		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE OF CALIFORNIA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTFORT, ALICE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WESTBOROUGH, MA 01581		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3535/4629 Rpt: 3538/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTH, ANDREA <hr/> 6 Contributor address; City; State; Zip Code OCONOMOWOC, WI 53066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) JANITOR		9 Employer (See Instructions) LA MAINTENANCE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTH, ANDREA <hr/> Contributor address; City; State; Zip Code OCONOMOWOC, WI 53066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions) LA MAINTENANCE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTH, ANDREA <hr/> Contributor address; City; State; Zip Code OCONOMOWOC, WI 53066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions) LA MAINTENANCE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHFUCHS, STEPHANIE <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR, KM		Employer (See Instructions) RGA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHMAN-DENES, LUCIA B. <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60637	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) U. CHICAGO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3536/4629 Rpt: 3539/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHSTEIN, TRACY <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA BEACH, FL 32459	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHSTEIN, TRACY <hr/> Contributor address; City; State; Zip Code SANTA ROSA BEACH, FL 32459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHSTEIN, TRACY <hr/> Contributor address; City; State; Zip Code SANTA ROSA BEACH, FL 32459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTNER, JANET <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611-6169	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUK, TERRY <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3537/4629 Rpt: 3540/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUK, TERRY <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUSE, ALLISON <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION ADMINISTRATION		Employer (See Instructions) STANFORD UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUSE, L. BEATRICE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUSU, DWIGHT <hr/> Contributor address; City; State; Zip Code REDMOND, WA 98052-9427	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROVANG, MEGAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) PEARSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3538/4629 Rpt: 3541/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWAN, DANA <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWAN, DANA <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77345	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWE, DANA <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWE, DANA <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWE, DANA <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3539/4629 Rpt: 3542/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWELL, ANITA <hr/> 6 Contributor address; City; State; Zip Code NOVATO, CA 94949	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) AUTHOR		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, JUDITH <hr/> Contributor address; City; State; Zip Code CUYAHOGA FALLS, OH 44223	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, JUDITH <hr/> Contributor address; City; State; Zip Code CUYAHOGA FALLS, OH 44223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, JUDITH <hr/> Contributor address; City; State; Zip Code CUYAHOGA FALLS, OH 44223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, PATRICIA <hr/> Contributor address; City; State; Zip Code BLAKESBURG, IA 52536	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3540/4629 Rpt: 3543/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLAND, PATRICIA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code FRISCO, TX 75034		
8 Principal occupation / Job title (See Instructions) IT ENGINEER		9 Employer (See Instructions) AT&T
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLS, JO	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WESTWORTH VILLAGE, TX 76114		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLS, JO	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WESTWORTH VILLAGE, TX 76114		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWOLD-BROWN, LINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWSEY, JEANETTE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3541/4629 Rpt: 3544/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWSEY, JEANETTE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWSEY, JEANETTE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78665		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, CAROL E	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, CAROL E	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, CAROL E	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33409		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3542/4629 Rpt: 3545/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, DORLY <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, DORLY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, MEGHNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) PLURALSIGHT
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, MEGHNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) PLURALSIGHT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, MICHELLE <hr/> Contributor address; City; State; Zip Code LA, CA 90048	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3543/4629 Rpt: 3546/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROYAL, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROYCE, JEFFREY <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55416	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROYCE, MICHAEL <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TV WRITER/PRODUCER		Employer (See Instructions) SNOWPANTS PRODUCTIONS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROYCE, MICHAEL <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TV WRITER/PRODUCER		Employer (See Instructions) SNOWPANTS PRODUCTIONS
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROYCE, MICHAEL <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TV WRITER/PRODUCER		Employer (See Instructions) SNOWPANTS PRODUCTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3544/4629 Rpt: 3547/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBENSTEIN, ADRIENNE <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions) ADRIENNE RUBENSTEIN
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBILAR, RUBI <hr/> Contributor address; City; State; Zip Code FOREST, VA 24551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FAIRFAX COUNTY PUBLIC SCHOOLS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBILAR, RUBI <hr/> Contributor address; City; State; Zip Code FOREST, VA 24551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FAIRFAX COUNTY PUBLIC SCHOOLS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBILAR, RUBI <hr/> Contributor address; City; State; Zip Code FOREST, VA 24551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FAIRFAX COUNTY PUBLIC SCHOOLS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBIN, GERALD <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) EXECUTIVE CHAIRMAN		Employer (See Instructions) RIVER OAKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3545/4629 Rpt: 3548/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBIN, KENNETH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CLIFFSIDE PARK, NJ 07010		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) ST FRANCIS HOSPITAL, ROSLYN, NY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBIN, MARLENE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBINOWITZ, SHARON	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SEA CLIFF, NY 11579		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBIO, VANESSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76131		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SCI
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUBIS, LEON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code VIENNA, VA 22180		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3546/4629 Rpt: 3549/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUCKER-SCHMIDT, RACHEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PATHOLOGIST		9 Employer (See Instructions) MD PATHOLOGY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUCKRIEGEL, KARA LEE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUCKRIEGEL, KARA LEE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUCKRIEGEL, KARA LEE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUCKRIEGEL, KARA LEE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3547/4629 Rpt: 3550/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDEBUSCH, VERNE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDNER, STEVEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RUDNER LAW OFFICES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUDNICKI, JANET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SERVICE CORPORATION INTERNATIONAL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUE, SALLY <hr/> Contributor address; City; State; Zip Code JUNEAU, AK 99801-7924	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUELL, STEPHEN <hr/> Contributor address; City; State; Zip Code CANAAN, ME 04924	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) STEPHEN RUELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3548/4629 Rpt: 3551/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUELL, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code CANAAN, ME 04924	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) STEPHEN RUELL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUFF, ALBERT <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75181	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PUBLIC SAFETY		Employer (See Instructions) DPD
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUFF, LINDA <hr/> Contributor address; City; State; Zip Code BACLIFF, TX 77518	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) TEACHER
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUFF, LINDA <hr/> Contributor address; City; State; Zip Code BACLIFF, TX 77518	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) TEACHER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUGAR, LYDIA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85716	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TUSD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3549/4629 Rpt: 3552/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUGGIERI, FRANCIS <hr/> 6 Contributor address; City; State; Zip Code VENETIA, PA 15367	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) HUMAN RESOURCES		9 Employer (See Instructions) LUCAS SYSTEMS
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RULE, SCOTT <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RULE, SCOTT <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUNCO, MARK <hr/> Contributor address; City; State; Zip Code BISHOP, GA 30621	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF GEORGIA
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUNDELL, JUDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3550/4629 Rpt: 3553/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUNNELS, AMANDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PEARLAND, TX 77584		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUPANI, NASRUDDIN	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) WORLDS GOLD & DIAMONDS INC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUPANI, NASRUDDIN	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77036		
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) WORLDS GOLD & DIAMONDS INC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSAK, KEARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code ORO VALLEY, AZ 85737		
Principal occupation / Job title (See Instructions) CLINICAL DIETITIAN		Employer (See Instructions) HOSPITAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSAK, KEARA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ORO VALLEY, AZ 85737		
Principal occupation / Job title (See Instructions) CLINICAL DIETITIAN		Employer (See Instructions) HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3551/4629 Rpt: 3554/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSH, BARBARA <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273-1018	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSH, EARL <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94604	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSH, EARL <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSH, EARL <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSH, EARL <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3552/4629 Rpt: 3555/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSH, EARL	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code OAKLAND, CA 94604		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHIN, CAMRON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) IXIA
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHIN, CAMRON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) IXIA
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHING, DANIEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ORLANDO, FL 32801-4022		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CLUB ORLANDO
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHING, JIMMIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3553/4629 Rpt: 3556/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHING, JIMMIE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHMER, VERA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code OCEAN CITY, NJ 08226		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSHMER, VERA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code OCEAN CITY, NJ 08226		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3554/4629 Rpt: 3557/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	7 Amount of Contribution (\$) \$27.00
6 Contributor address; City; State; Zip Code TYLER, TX 75703		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3555/4629 Rpt: 3558/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSK, MITZI <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSKIN, MATT <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FILM DIRECTOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSAK, FERN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PEDIATRICIAN		Employer (See Instructions) NW PERMANENTE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, ESQ., DYLAN <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SORRELS LAW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3556/4629 Rpt: 3559/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90042	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, JOSEPH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90042	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, JOSEPH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, LYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, NANCY <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3557/4629 Rpt: 3560/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, TERRY <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76016	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OPERATIONS		9 Employer (See Instructions) CORRUGATED PARTNERS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, TERRY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, TERRY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) CORRUGATED PARTNERS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, VIRGINIA <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37214	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, WILLIAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CANVASSER		Employer (See Instructions) TEXAS ORGANIZING PROJECT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3558/4629 Rpt: 3561/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CANVASSER		9 Employer (See Instructions) TEXAS ORGANIZING PROJECT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUST, JEANMARIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTA, GEORGE <hr/> Contributor address; City; State; Zip Code VENICE, FL 34293	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTH, DEBORAH <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$41.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTH, PATRICIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3559/4629 Rpt: 3562/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTHERFORD, BRUCE <hr/> 6 Contributor address; City; State; Zip Code VASHON, WA 98070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTHERFORD, BRUCE <hr/> Contributor address; City; State; Zip Code VASHON, WA 98070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTHERFORD, BRUCE <hr/> Contributor address; City; State; Zip Code VASHON, WA 98070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTHERFORD, BRUCE <hr/> Contributor address; City; State; Zip Code VASHON, WA 98070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTHERFORD, CYNTHIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219-5500	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3560/4629 Rpt: 3563/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3561/4629 Rpt: 3564/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3562/4629 Rpt: 3565/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3563/4629 Rpt: 3566/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3564/4629 Rpt: 3567/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTISHAUSER, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTLEDGE, DANIEL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MERRIMACK, NH 03054		
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) PROS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTZ SUSMAN, BRENDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUUD, CHRIS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78705		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3565/4629 Rpt: 3568/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUZO, ANDRES <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75243	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) LINKAMERICA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, BELINDA <hr/> Contributor address; City; State; Zip Code MARIETTA, GA 30060	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) DELTA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3566/4629 Rpt: 3569/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> 6 Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3567/4629 Rpt: 3570/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, CONNIE <hr/> 6 Contributor address; City; State; Zip Code BRIGHTWOOD, OR 97011	7 Amount of Contribution (\$) \$19.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, JOSEPHINE <hr/> Contributor address; City; State; Zip Code RED OAK, TX 75154	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SMU
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, JOSEPHINE <hr/> Contributor address; City; State; Zip Code RED OAK, TX 75154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SMU
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, JOSEPHINE <hr/> Contributor address; City; State; Zip Code RED OAK, TX 75154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SMU
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, KAREN <hr/> Contributor address; City; State; Zip Code TINLEY PARK, IL 60477	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3568/4629 Rpt: 3571/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, MICHAEL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, MICHAEL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, MICHAEL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, PATRICK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) DYKEMA GOSSETT PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3569/4629 Rpt: 3572/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, TIMOTHY <hr/> 6 Contributor address; City; State; Zip Code SOMERVILLE, MA 02143	7 Amount of Contribution (\$) \$3.75
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) FACEBOOK
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, TIMOTHY <hr/> Contributor address; City; State; Zip Code SOMERVILLE, MA 02143	Amount of Contribution (\$) \$3.75
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) FACEBOOK
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77265-5393	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYBCZYK, MADELYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) CINEMARK USA, INC.
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S ALIX, MARGUERITE <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) BARISTA		Employer (See Instructions) STARBUCKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3570/4629 Rpt: 3573/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S DOSS, PETER	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code WARREN, NJ 07059		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S FROSCHE, PAUL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW FAIRFIELD, CT 06812		
Principal occupation / Job title (See Instructions) RETITED		Employer (See Instructions) N/A
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S LEYENDECKER, M	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAAL, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11218-5345		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAINT PAUL, MN 55127		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3571/4629 Rpt: 3574/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> 6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3572/4629 Rpt: 3575/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> 6 Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAARI, KAREN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55127	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SABIN, JONATHAN <hr/> Contributor address; City; State; Zip Code IOWA CITY, IA 52240	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) VORTEX BUSINESS SOLUTIONS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SABLE, RICHARD <hr/> Contributor address; City; State; Zip Code ROCHESTER, MI 48306	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACCO JR, GREGORY E <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$51.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3573/4629 Rpt: 3576/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACCO JR, GREGORY E <hr/> 6 Contributor address; City; State; Zip Code RUMSON, NJ 07760	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACCO JR, GREGORY E <hr/> Contributor address; City; State; Zip Code RUMSON, NJ 07760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACHAR, LOUIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACHS, BARBARA <hr/> Contributor address; City; State; Zip Code PALATINE, IL 60074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACTER, JOSEPH <hr/> Contributor address; City; State; Zip Code BRONX, NY 10471-1804	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3574/4629 Rpt: 3577/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACKEY, DONNIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78721	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SACKEY, DONNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADA, BEATRICE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79915	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADDLEMIRE, THOMAS <hr/> Contributor address; City; State; Zip Code STEAMBOAT SPRINGS, CO 80477	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADLEK, MARK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208-3033	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE COACH		Employer (See Instructions) HARVEST YOUR POTENTIAL, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3575/4629 Rpt: 3578/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, ANA <hr/> 6 Contributor address; City; State; Zip Code LAREDO, TX 78043	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, ANA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, GLORIA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, GLORIA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, GLORIA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3576/4629 Rpt: 3579/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, GRACIELA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77023	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, KELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, LIZ <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ENGAGE! LEARNING
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, MARTIN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, MATTHEW <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) WATTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3577/4629 Rpt: 3580/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, MATTHEW	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202		
8 Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		9 Employer (See Instructions) WATTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, MIGUEL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, RAQUEL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		Employer (See Instructions) GIRLS LEAP
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, RAQUEL	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		Employer (See Instructions) GIRLS LEAP
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, RAQUEL	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		Employer (See Instructions) GIRLS LEAP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3578/4629 Rpt: 3581/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, ROSALBA <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CONSULTING		9 Employer (See Instructions) VIP MEDICAL
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, SELINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO COUNTY ATTORNEYS OFFICE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, SELINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO COUNTY ATTORNEYS OFFICE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, SELINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO COUNTY ATTORNEYS OFFICE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, SELINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO COUNTY ATTORNEYS OFFICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3579/4629 Rpt: 3582/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAENZ, SIGIFREDO <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87112	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAFFRAN, MARY JANE <hr/> Contributor address; City; State; Zip Code NEWARK, DE 19702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAFFRAN, MARY JANE <hr/> Contributor address; City; State; Zip Code NEWARK, DE 19702	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAFIER, ELLEN <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAFIER, ELLEN <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3580/4629 Rpt: 3583/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAGER, MARILYN D.	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code SEGUIN, TX 78155-4015	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAGINAW, KAREN	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code DALLAS, TX 75230	
Principal occupation / Job title (See Instructions) PODIATRIST		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAGONA, TOM	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78727	
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FARM CREDIT BANK
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAHM, SHARON	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code DENTON, TX 76202	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAHM, SHARON	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code DENTON, TX 76202	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3581/4629 Rpt: 3584/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAID, MOHAMAD <hr/> 6 Contributor address; City; State; Zip Code MURPHY, TX 75094-5323	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) DENTIST		9 Employer (See Instructions) HJ DENTAL
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAIDI, BRIGITTE B <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAIDI, BRIGITTE B <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAIDI, BRIGITTE B <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAIDI, BRIGITTE B <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3582/4629 Rpt: 3585/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAIDI, BRIGITTE B	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKAHARA, MICHAEL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SPLUNK, INC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKAKEENY, ROBERT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code WORCESTER, MA 01609	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKAKEENY, ROBERT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code WORCESTER, MA 01609	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKELLARIDES, ADAM	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code PASADENA, CA 91105	
Principal occupation / Job title (See Instructions) MOTION GRAPHICS DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3583/4629 Rpt: 3586/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKELLARIDES, ADAM <hr/> 6 Contributor address; City; State; Zip Code PASADENA, CA 91105	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) MOTION GRAPHICS DESIGNER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKO, JULIE <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98178	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MEDICAL TECHNOLOGIST		Employer (See Instructions) UWMC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAKS, RONALD <hr/> Contributor address; City; State; Zip Code CLAYTON, MO 63105	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS, MARIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS, PEDRO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79903	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ESTIMATOR		Employer (See Instructions) CMC REBAR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3584/4629 Rpt: 3587/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS, TERESA	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code OCONOMOWOC, WI 53066	
8 Principal occupation / Job title (See Instructions) SENIOR IT ENGINEER		9 Employer (See Instructions) MADISON AREA TECHNICAL COLLEGE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS MENDOZA, MARIA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code EL PASO, TX 79925	
Principal occupation / Job title (See Instructions) DISTRICT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS MENDOZA, MARIA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code EL PASO, TX 79925	
Principal occupation / Job title (See Instructions) DISTRICT JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78756	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78756	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3585/4629 Rpt: 3588/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3586/4629 Rpt: 3589/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA <hr/> 6 Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA <hr/> Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA <hr/> Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA <hr/> Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA <hr/> Contributor address; City; State; Zip Code SHOAL CREEK BLVD AUSTIN, TX 78756-2912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3587/4629 Rpt: 3590/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALATHE, DOUGLAS <hr/> 6 Contributor address; City; State; Zip Code BRONX, NY 10462	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE HOUSING DEVELOPMENT SPECIALIST		9 Employer (See Instructions) NYC DEPARTMENT OF SOCIAL SERVICES
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALATHE, DOUGLAS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL SERVANT		Employer (See Instructions) CITY OF NEW YORK DEPARTMENT OF SOCIAL SERVICES
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALATHE, DOUGLAS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL SERVANT		Employer (See Instructions) CITY OF NEW YORK DEPARTMENT OF SOCIAL SERVICES
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALATHE, DOUGLAS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL SERVANT		Employer (See Instructions) CITY OF NEW YORK DEPARTMENT OF SOCIAL SERVICES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, ELAINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) AMPERSAND ART

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3588/4629 Rpt: 3591/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, JENNIFER	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
8 Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, JOSE A	Amount of Contribution (\$) \$12.01
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412-4415		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, JOSE A	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78412-4415		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, LYDIA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code KATY, TX 77450		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAZAR, LYDIA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code KATY, TX 77450		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3589/4629 Rpt: 3592/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALCIDO, ISABEL <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79938	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) CITY COUNCILWOMAN		9 Employer (See Instructions) CITY OF EL PASO
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALCIDO, ISABEL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) CITY COUNCILWOMAN		Employer (See Instructions) CITY OF EL PASO
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALCIDO, ISABEL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79938	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) CITY COUNCILWOMAN		Employer (See Instructions) CITY OF EL PASO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALCIDO, LISA <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LANDSCAPE DESIGN		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDANA, AMANDA <hr/> Contributor address; City; State; Zip Code PHARR, TX 78577	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3590/4629 Rpt: 3593/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDANA, MARGARET <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78758	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) DAYCARE PROVIDER		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALDANA, MARGARET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DAYCARE PROVIDER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALEM, M. EMAD <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELLSTATE METRO REALTY
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALEM, M. EMAD <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELLSTATE METRO REALTY
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALEM, M. EMAD <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELLSTATE METRO REALTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3591/4629 Rpt: 3594/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALES, COURTNEY <hr/> 6 Contributor address; City; State; Zip Code ROSHARON, TX 77583	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SUPERINTENDENT		9 Employer (See Instructions) BLOOM ACADEMY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALHI, RACHEL <hr/> Contributor address; City; State; Zip Code SIERRA MADRE, CA 91025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR PROJECT MGR		Employer (See Instructions) GIBSON DUNN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALHI, RACHEL <hr/> Contributor address; City; State; Zip Code SIERRA MADRE, CA 91025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR PROJECT MGR		Employer (See Instructions) GIBSON DUNN
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALIN, VICTORIA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALIN, VICTORIA <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3592/4629 Rpt: 3595/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, ALEJANDRA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SUSMAN GODFREY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, ALEJANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SUSMAN GODFREY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, AMANDA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015-5104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CHAIR OF MATHEMATICS AND ACCOUNTING		Employer (See Instructions) ALAMO COLLEGE DISTRICT
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, AMANDA <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015-5104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CHAIR OF MATHEMATICS AND ACCOUNTING		Employer (See Instructions) ALAMO COLLEGE DISTRICT
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, CLAUDIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DAVITAP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3593/4629 Rpt: 3596/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, DELFINA	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code MCALLEN, TX 78501	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, DELFINA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code MCALLEN, TX 78501	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, DELFINA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code MCALLEN, TX 78501	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, HECTOR R	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77092	
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) ARSLAN
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, HECTOR R	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77092	
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) ARSLAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3594/4629 Rpt: 3597/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALINAS, SHELIA <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77551	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ENGINEERING		9 Employer (See Instructions) LOCKHEED MARTIN
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALLEE, BARBARA <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALLEE, KITTIE <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76087	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALLEE, WILLIAM <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALMAN, SULIMAN <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ORTHODONTIST		Employer (See Instructions) RODEO DENTAL AND ORTHODONTICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3595/4629 Rpt: 3598/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALMANSON, KARA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALMON, STEPHANIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DATA ENTRY CLERK		Employer (See Instructions) TARGA RESOURCES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALMONESE, VICKI <hr/> Contributor address; City; State; Zip Code DURANGO, CO 81301	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) AVICULTURIST		Employer (See Instructions) SEAWORLD
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALOMON, STUART <hr/> Contributor address; City; State; Zip Code WARE, MA 01082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALOMON, STUART <hr/> Contributor address; City; State; Zip Code WARE, MA 01082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3596/4629 Rpt: 3599/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALTER, DAYNA <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALTER, DAYNA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALTER, DAYNA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALUTE, SA LDRS FOR UNIV OF TX EXCLLNC <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PAC		Employer (See Instructions) SALUTE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALUTE, SA LDRS FOR UNIV OF TX EXCLLNC <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PAC		Employer (See Instructions) SALUTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3597/4629 Rpt: 3600/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALUTE, SA LDRS FOR UNIV OF TX EXCLLNC	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
8 Principal occupation / Job title (See Instructions) PAC		9 Employer (See Instructions) SALUTE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALUTE, SA LDRS FOR UNIV OF TX EXCLLNC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) PAC		Employer (See Instructions) SALUTE
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVA, DANIEL	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119		
Principal occupation / Job title (See Instructions) CHEF INSTRUCTOR		Employer (See Instructions) MANNA ON MAIN STREET
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVACION, HERCULANO	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code HOUSTON, TX 77018		
Principal occupation / Job title (See Instructions) NURSING ASSISTANT		Employer (See Instructions) METHODIST
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVACION, HERCULANO	Amount of Contribution (\$) \$22.00
Contributor address; City; State; Zip Code HOUSTON, TX 77018		
Principal occupation / Job title (See Instructions) NURSING ASSISTANT		Employer (See Instructions) METHODIST

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3598/4629 Rpt: 3601/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVAGE, JAMES <hr/> 6 Contributor address; City; State; Zip Code ORLANDO, FL 32812	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVAT, ALINA <hr/> Contributor address; City; State; Zip Code JOHNSTON, IA 50131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INTERPRETER		Employer (See Instructions) ACELS, LLC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVAT, ALINA <hr/> Contributor address; City; State; Zip Code JOHNSTON, IA 50131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INTERPRETER		Employer (See Instructions) ACELS, LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALVI, VINEETA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$51.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMANDARI, SUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ON SUNSET BOULEVARD INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3599/4629 Rpt: 3602/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMANDARI, SUDY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77030	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) ON SUNSET BOULEVARD INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMANDARI, SUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ON SUNSET BOULEVARD INC
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMANDARI, SUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ON SUNSET BOULEVARD INC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMANDARI, SUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ON SUNSET BOULEVARD INC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMANDARI, SUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) ON SUNSET BOULEVARD INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3600/4629 Rpt: 3603/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMFORD, KAREN <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75033	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMMANN, PATRICIA <hr/> Contributor address; City; State; Zip Code URBANA, IL 61801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLE, MARY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) HEIDELBERG MATERIALS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLE, MARY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) HEIDELBERG MATERIALS
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLE, MARY <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) HEIDELBERG MATERIALS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3601/4629 Rpt: 3604/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPLES, RON	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77061		
8 Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		9 Employer (See Instructions) TEXAS SOUTHERN UNIVERSITY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPSON, DAVID	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CHICAGO, IL 60653		
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPSON, DEMETRIS	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code DALLAS, TX 75375		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMPSON, ELIZABETH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LUMBERPORT, WV 26386		
Principal occupation / Job title (See Instructions) HOME CARE		Employer (See Instructions) LADY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMUEL, JADA	Amount of Contribution (\$) \$2.70
Contributor address; City; State; Zip Code COLUMBIA, SC 29209		
Principal occupation / Job title (See Instructions) MISS SOUTH CAROLINA		Employer (See Instructions) JADA SAMUEL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3602/4629 Rpt: 3605/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMUEL, JADA <hr/> 6 Contributor address; City; State; Zip Code COLUMBIA, SC 29209	7 Amount of Contribution (\$) \$2.70
8 Principal occupation / Job title (See Instructions) MISS SOUTH CAROLINA		9 Employer (See Instructions) JADA SAMUEL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMUELS, ALIX <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAMUELS, JOSHUA A <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UT MEDICAL SCHOOL AT HOUSTON
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, CYNTHIA <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER/CURRICULUM DEVELOPER		Employer (See Instructions) ORACLE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, DORIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS/OFFICE COORDINATOR		Employer (See Instructions) WILLIAMSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3603/4629 Rpt: 3606/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, DORIS	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) COMMUNICATIONS/OFFICE COORDINATOR		9 Employer (See Instructions) WILLIAMSON COUNTY
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, DORIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) COMMUNICATIONS SPECIALIST		Employer (See Instructions) WILLIAMSON COUNTY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, DORIS	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) COMMUNICATIONS SPECIALIST		Employer (See Instructions) WILLIAMSON COUNTY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, DORIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) COMMUNICATIONS SPECIALIST		Employer (See Instructions) WILLIAMSON COUNTY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, GERARDO	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code DALLAS, TX 75232		
Principal occupation / Job title (See Instructions) DIRECTOR OF PUBLIC AFFAIRS		Employer (See Instructions) VISIT DALLAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3604/4629 Rpt: 3607/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, LENORE <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79924	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, NOELIA <hr/> Contributor address; City; State; Zip Code SAN BENITO, TX 78586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LYRA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, NOELIA <hr/> Contributor address; City; State; Zip Code SAN BENITO, TX 78586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) LYRA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ, SALVADOR <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) STATE OF TEXAS
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANCHEZ-NAVARRO, BLANCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3605/4629 Rpt: 3608/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDACZ, NANCY <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76012	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDACZ, NANCY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75232	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75232	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75232	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3606/4629 Rpt: 3609/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, BETTY	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, BETTY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, CHARLES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) DIRECTOR BUSINESS DEVELOPMENT		Employer (See Instructions) AIR LIQUIDE LARGE INDUSTRIES
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, CHARLES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) DIRECTOR BUSINESS DEVELOPMENT		Employer (See Instructions) AIR LIQUIDE LARGE INDUSTRIES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, CLINTON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code COEUR DALENE, ID 83814		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3607/4629 Rpt: 3610/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code LINDALE, TX 75706	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, CYNTHIA <hr/> Contributor address; City; State; Zip Code LINDALE, TX 75706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, DEREK <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) HFSC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, DONNA <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) DAY NURSERY OF ABILENE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, DONNA <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) DAY NURSERY OF ABILENE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3608/4629 Rpt: 3611/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, DONNA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code ABILENE, TX 79602		
8 Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		9 Employer (See Instructions) DAY NURSERY OF ABILENE
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, DONNA	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code ABILENE, TX 79602		
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) DAY NURSERY OF ABILENE
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, DONNA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ABILENE, TX 79602		
Principal occupation / Job title (See Instructions) FINANCIAL MANAGER		Employer (See Instructions) DAY NURSERY OF ABILENE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, HASSAN S	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AVENEL, NJ 07001		
Principal occupation / Job title (See Instructions) CDL A TRUCK DRIVER		Employer (See Instructions) CINTAS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, JAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75230-2002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3609/4629 Rpt: 3612/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, JAN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75230-2002		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, LINK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95126-2020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, LINK	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95126-2020		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, MAGGIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, MAGGIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WACO, TX 76710		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3610/4629 Rpt: 3613/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, MONIQUE <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PHARMACY OWNER		9 Employer (See Instructions) SCRIPT SOURCE PHARMACY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, MONIQUE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHARMACY OWNER		Employer (See Instructions) SCRIPT SOURCE PHARMACY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$2,022.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$2,022.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY P <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3611/4629 Rpt: 3614/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY P	7 Amount of Contribution (\$) \$2,700.00
	6 Contributor address; City; State; Zip Code DALLAS, TX 75229	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY P	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code DALLAS, TX 75229	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY P	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code DALLAS, TX 75229	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY P	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code DALLAS, TX 75229	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, NANCY P	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code DALLAS, TX 75229	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3612/4629 Rpt: 3615/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, RACHEL <hr/> 6 Contributor address; City; State; Zip Code BRAZORIA, TX 77422	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, SUSAN <hr/> Contributor address; City; State; Zip Code ALLENTOWN, PA 18104	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3613/4629 Rpt: 3616/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, SUSAN	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code ALLENTOWN, PA 18104	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, VINCENT	Amount of Contribution (\$) \$59.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77071	
Principal occupation / Job title (See Instructions) SYSTEMS PLANNER		Employer (See Instructions) HOUSTON METRO
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, VINCENT	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77071	
Principal occupation / Job title (See Instructions) SYSTEMS PLANNER		Employer (See Instructions) HOUSTON METRO
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, VINCENT	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77071	
Principal occupation / Job title (See Instructions) SYSTEMS PLANNER		Employer (See Instructions) HOUSTON METRO
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, VINCENT	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77071	
Principal occupation / Job title (See Instructions) SYSTEMS PLANNER		Employer (See Instructions) HOUSTON METRO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3614/4629 Rpt: 3617/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, VINCENT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77071	7 Amount of Contribution (\$) \$59.00
8 Principal occupation / Job title (See Instructions) SYSTEMS PLANNER		9 Employer (See Instructions) HOUSTON METRO
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERS, VINCENT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77071	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SYSTEMS PLANNER		Employer (See Instructions) HOUSTON METRO
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDLES, EVERETT <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDLES, EVERETT <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDLES, EVERETT <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TEXAS CHILDREN'S HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3615/4629 Rpt: 3618/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDLIN, RYAN	7 Amount of Contribution (\$) \$20.24
	6 Contributor address; City; State; Zip Code CYPRESS, TX 77433	
8 Principal occupation / Job title (See Instructions) SENIOR INTERNAL AUDITOR		9 Employer (See Instructions) DISTRIBUTIONNOW
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDLIN, RYAN	Amount of Contribution (\$) \$20.24
	Contributor address; City; State; Zip Code CYPRESS, TX 77433	
Principal occupation / Job title (See Instructions) SENIOR INTERNAL AUDITOR		Employer (See Instructions) DISTRIBUTIONNOW
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOSKI, SHAMERA	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code ERIE, CO 80516	
Principal occupation / Job title (See Instructions) ACCOUNT MANAGEMENT		Employer (See Instructions) NAMASTE SOLAR
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) SCRUM MASTER		Employer (See Instructions) USAA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) SCRUM MASTER		Employer (See Instructions) USAA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3616/4629 Rpt: 3619/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
8 Principal occupation / Job title (See Instructions) SCRUM MASTER		9 Employer (See Instructions) USAA
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) SCRUM MASTER		Employer (See Instructions) USAA
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) SCRUM MASTER		Employer (See Instructions) USAA
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) SCRUM MASTER		Employer (See Instructions) FINANCIAL SVCS CO
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, GINA	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	
Principal occupation / Job title (See Instructions) SCRUM MASTER		Employer (See Instructions) FINANCIAL SVCS CO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3617/4629 Rpt: 3620/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, JANET 6 Contributor address; City; State; Zip Code PALMDALE, CA 93551	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, MONICA Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, MONICA Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDOVAL, REBECCA Contributor address; City; State; Zip Code SACRAMENTO, CA 95834	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDRETTI, TIMOTHY Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CORE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3618/4629 Rpt: 3621/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDRETTI, TIMOTHY <hr/> 6 Contributor address; City; State; Zip Code BEDFORD, TX 76021	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) CORE
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDRETTI, TIMOTHY <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) CORE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, GWENDOLYN <hr/> Contributor address; City; State; Zip Code ALTADENA, CA 91001	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST/ENTERTAINER		Employer (See Instructions) GWENDOLYN SANFORD
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, JANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, JD <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) JOHN B. SANFORD REAL ESTATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3619/4629 Rpt: 3622/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SWEETWATER, TX 79556	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, ROBERT <hr/> Contributor address; City; State; Zip Code SWEETWATER, TX 79556	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANFORD, TERESA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SR PROJECT MANAGER		Employer (See Instructions) HAYSTACKID
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANGBHGH, W <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANGBHGH, W <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3620/4629 Rpt: 3623/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANKARI, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANSORES, KATHRYN <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROPOSAL MANAGER		Employer (See Instructions) REMEDIAL CONSTRUCTION
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTAMARINA, EVERARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) BUDGET POWER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTANA ALVARADO, ERICA <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) MANAGER OF OPERATIONAL EXCELLENCE		Employer (See Instructions) INTEGRATED HUMAN CAPITAL
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTIAGO, PHILIP <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90064	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SWLF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3621/4629 Rpt: 3624/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTIAGO, ROSA	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code SPRING, TX 77382		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTILLAN, IRISEILIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MCALLEN, TX 78503		
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) WALMART
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTINI, MIKE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BELLINGHAM, WA 98229		
Principal occupation / Job title (See Instructions) TUG CAPTAIN		Employer (See Instructions) CROWLEY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTIRE, STANLEY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77077		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SANTIRE LAW FIRM, PLLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTISO, ANN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KINNELON, NJ 07405		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3622/4629 Rpt: 3625/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, KARI	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code BOULDER, CO 80304		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SELF EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, KARI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BOULDER, CO 80304		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, RICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92115		
Principal occupation / Job title (See Instructions) CONTRACT ANALYST		Employer (See Instructions) COUNTY OF SAN DIEGO
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, RICK	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92115		
Principal occupation / Job title (See Instructions) CONTRACT ANALYST		Employer (See Instructions) COUNTY OF SAN DIEGO
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, RICK	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92115		
Principal occupation / Job title (See Instructions) CONTRACT ANALYST		Employer (See Instructions) COUNTY OF SAN DIEGO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3623/4629 Rpt: 3626/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, RICK <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92115	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CONTRACT ANALYST		9 Employer (See Instructions) COUNTY OF SAN DIEGO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, TED <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, TED <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, TED <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTOS, TED <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3624/4629 Rpt: 3627/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75248		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3625/4629 Rpt: 3628/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75248		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANTUCCI, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAPONARO, CAROL	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code PLANTATION, FL 33325		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAPONARO, CAROL	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code PLANTATION, FL 33325		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAPONARO, CAROL	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code PLANTATION, FL 33325		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3626/4629 Rpt: 3629/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAPONARO, CAROL <hr/> 6 Contributor address; City; State; Zip Code PLANTATION, FL 33325	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAPONARO, CAROL <hr/> Contributor address; City; State; Zip Code PLANTATION, FL 33325	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAPPENFIELD, WILLIAM <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARADPON, HECTOR <hr/> Contributor address; City; State; Zip Code SYKESVILLE, MD 21784	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMPUTERS		Employer (See Instructions) GOVT
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARAHAN, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EARTH & WATER LAW, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3627/4629 Rpt: 3630/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARAHAN, PAUL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) EARTH & WATER LAW, LLC
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARANOVICH, MICHELE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARGEANT, DEBORAH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) JBEATD
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARGEANT, DEBORAH <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) JBEATD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARGENT, SOCORRO MULLER <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3628/4629 Rpt: 3631/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARGENT, SOCORRO MULLER <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79932	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARGENT, SOCORRO MULLER <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARINE, MARGARET <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RESPIRATORY THERAPIST		Employer (See Instructions) BSWHEALTH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARINE, MARGARET <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RESPIRATORY THERAPIST		Employer (See Instructions) BSWHEALTH
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARRAS, CESAR <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) TECH PM		Employer (See Instructions) SALESFORCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3629/4629 Rpt: 3632/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARTER, RICK	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20012		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARTOR, THOMAS	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code LOS ALTOS, CA 94022		
Principal occupation / Job title (See Instructions) PROP MGR		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARTOR, THOMAS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LOS ALTOS, CA 94022		
Principal occupation / Job title (See Instructions) PROP MGR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASANFAR, GUY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TALLAHASSEE, FL 32312		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASARIDIS, JUDITH	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3630/4629 Rpt: 3633/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASLOW, WAYNE <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COLLEGE FACULTY		9 Employer (See Instructions) TAMU
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASLOW, WAYNE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TAMU
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASLOW, WAYNE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COLLEGE FACULTY		Employer (See Instructions) TAMU
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASLOW, WAYNE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) TAMU
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASS, SALLY <hr/> Contributor address; City; State; Zip Code ASHTABULA, OH 44004-2880	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ASHTABULA AREA CITY SCHOOLS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3631/4629 Rpt: 3634/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASS, SALLY <hr/> 6 Contributor address; City; State; Zip Code ASHTABULA, OH 44004-2880	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ASHTABULA AREA CITY SCHOOLS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASS, SALLY <hr/> Contributor address; City; State; Zip Code ASHTABULA, OH 44004-2880	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ASHTABULA AREA CITY SCHOOLS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASS, WALTER <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) SURVEYOR		Employer (See Instructions) WEISSER ENGINEERING
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SASS, WALTER <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) SURVEYOR		Employer (See Instructions) WEISSER ENGINEERING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SATARINO, LESLIE <hr/> Contributor address; City; State; Zip Code PROSPER, TX 75078	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3632/4629 Rpt: 3635/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SATHER, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) BARRON AND NEWBURGER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SATINK, PHYLLIS <hr/> Contributor address; City; State; Zip Code UNDERHILL, VT 05489	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) APRN		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SATTERFIELD, CYNTHIA <hr/> Contributor address; City; State; Zip Code PACIFIC PALISADES, CA 90272	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAUCEDO, JOSEPHINE <hr/> Contributor address; City; State; Zip Code FEDERAL WAY, WA 98023	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SECRETARY
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAUER-BISHOP, KATHERINE <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3633/4629 Rpt: 3636/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAUER-BISHOP, KATHERINE	7 Amount of Contribution (\$) \$80.00
6 Contributor address; City; State; Zip Code BLANCO, TX 78606		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAUL, SHERYL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SOUTH POINT, OH 45680		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) VAMC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAULMON, ROBERTA	Amount of Contribution (\$) \$80.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAULS, DONNA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77007		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAUNDERS, JOHN	Amount of Contribution (\$) \$1,250.00
Contributor address; City; State; Zip Code BOZEMAN, MT 59715		
Principal occupation / Job title (See Instructions) SVP FINANCE		Employer (See Instructions) BRIDGER AEROSPACE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3634/4629 Rpt: 3637/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAURO, CONNIE <hr/> 6 Contributor address; City; State; Zip Code WILLIAMSTOWN, WV 26187	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAUVAGEAU, JENNIFER <hr/> Contributor address; City; State; Zip Code BETHEL, CT 06801	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAVAGE, CORINNE <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAVAL, MAUREEN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641-3654	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAVAL, MAUREEN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641-3654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3635/4629 Rpt: 3638/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAVAL, MAUREEN <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641-3654	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAVOY-HADLEY, TERRY <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77640	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAVOY-HADLEY, TERRY <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77640	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWTELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWTELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3636/4629 Rpt: 3639/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWTELL, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWTELL, CYNTHIA <hr/> Contributor address; City; State; Zip Code SAN ANSELMO, CA 94960	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWYER, ROBIN <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAMS MANAGER		Employer (See Instructions) VALUES UNITED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWYER, ROBIN <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAMS MANAGER		Employer (See Instructions) VALUES UNITED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWYER, STEVE <hr/> Contributor address; City; State; Zip Code PRESCOTT, AZ 86301	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3637/4629 Rpt: 3640/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAWYER-CUNNINGHAM, ELIZABETH J.	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code ALTADENA, CA 91001		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAXENA, DHIREN	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAXON, SEANA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DENVER, CO 80209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAXTON, JENNIFER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EDINBURG, TX 78539		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UT RIO GRANDE VALLEY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAY, JOSEPH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MANVEL, TX 77578		
Principal occupation / Job title (See Instructions) FIELD ENGINEER		Employer (See Instructions) MICROSOFT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3638/4629 Rpt: 3641/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAY, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code MANVEL, TX 77578	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FIELD ENGINEER		9 Employer (See Instructions) MICROSOFT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAYERS, THOMAS <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97203	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAYLES, LEONARD <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SBAITI, KATHERINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) HOME
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCAGGS, MARY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) HOUSTON CHEM SAFE INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3639/4629 Rpt: 3642/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCAGGS, MARY <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) HOUSTON CHEM SAFE INC.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCALZO, SUSAN <hr/> Contributor address; City; State; Zip Code HOWELL, NJ 07731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) PMA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCANLAN, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCANLAN, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCANLON, RYAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT BUSINESS OPERATIONS ANALYST		Employer (See Instructions) THE PLANET GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3640/4629 Rpt: 3643/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCANTLEBURY, VELMA <hr/> 6 Contributor address; City; State; Zip Code NEWARK, DE 19711	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) CHRISTIANA CARE HOSPITAL
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCARDINO, ALBERT <hr/> Contributor address; City; State; Zip Code BLUFFTON, SC 29910	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCARDINO, ALBERT <hr/> Contributor address; City; State; Zip Code BLUFFTON, SC 29910	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCARDINO, ALBERT <hr/> Contributor address; City; State; Zip Code BLUFFTON, SC 29910	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCARL, ETHAN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97215-4012	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3641/4629 Rpt: 3644/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCATTERGOOD, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CPHT		9 Employer (See Instructions) PRESCRIPTION PHARMACY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCATTERGOOD, CHRISTINA <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPHT		Employer (See Instructions) PRESCRIPTION PHARMACY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCATTERGOOD, CHRISTINA <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPHT		Employer (See Instructions) PRESCRIPTION PHARMACY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAACK, F. J. <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 88681	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAACK, F. J. <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RRISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3642/4629 Rpt: 3645/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAAR, PETER 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHACTER, BARBARA Contributor address; City; State; Zip Code PACIFIC PALISADES, CA 90272-2328	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHACTER, BARBARA Contributor address; City; State; Zip Code PACIFIC PALISADES, CA 90272-2328	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHACTER, ROBERT Contributor address; City; State; Zip Code HIDDEN HILLS, CA 91302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHACTER, ROBERT Contributor address; City; State; Zip Code HIDDEN HILLS, CA 91302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3643/4629 Rpt: 3646/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHACTER, ROBERT	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code HIDDEN HILLS, CA 91302	
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHACTER, ROBERT	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code HIDDEN HILLS, CA 91302	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAEFFER, SHIRLEY	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code LA GRANGE, TX 78945	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFER, MARGARET	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77082	
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFERSMAN, STEVEN	Amount of Contribution (\$) \$51.11
	Contributor address; City; State; Zip Code MIDLAND, TX 79707	
Principal occupation / Job title (See Instructions) CONSULTING SCIENTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3644/4629 Rpt: 3647/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFFER, CLOE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code WINDSOR, VT 05089		
8 Principal occupation / Job title (See Instructions) LANDSCAPE GARDEN DESIGNER		9 Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFFER, CLOE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WINDSOR, VT 05089		
Principal occupation / Job title (See Instructions) LANDSCAPE GARDEN DESIGNER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFFER, DIANE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ASHLAND, OR 97520		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFFER, JAMES	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46208		
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) INDIANA TECH. UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAFFER, JOEL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ORINDA, CA 94563		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3645/4629 Rpt: 3648/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHANBERG, LAURA <hr/> 6 Contributor address; City; State; Zip Code DURHAM, NC 27705-9061	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) DUKE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHANGE, MARY <hr/> Contributor address; City; State; Zip Code WACO, TX 76706	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAPIRO, SUSAN <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45242	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHARAR, DOREEN <hr/> Contributor address; City; State; Zip Code OCALA, FL 34481	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHARFF, CAROL <hr/> Contributor address; City; State; Zip Code LARCHMONT, NY 10538	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3646/4629 Rpt: 3649/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHARFSTEIN, ILAN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10025	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) RENAISSANCE CENTRO
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAUBHUT, NANCY <hr/> Contributor address; City; State; Zip Code CLINTONDALE, NY 12515	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) CHURCH PENSION GROUP
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAUER, JOAN <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHAUER, JOAN <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, LAWRENCE <hr/> Contributor address; City; State; Zip Code HENRICO, VA 23229	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3647/4629 Rpt: 3650/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, LAWRENCE <hr/> 6 Contributor address; City; State; Zip Code HENRICO, VA 23229	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, LAWRENCE <hr/> Contributor address; City; State; Zip Code HENRICO, VA 23229	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, LILLIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, LILLIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, RUTH <hr/> Contributor address; City; State; Zip Code LEAWOOD, KS 66209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3648/4629 Rpt: 3651/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHECHTER, RUTH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LEAWOOD, KS 66209		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEFFER, K D	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BURLESON, TX 76028		
Principal occupation / Job title (See Instructions) PROGRAM ANALYST		Employer (See Instructions) CORPS OF ENGINEERS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEIBE, BROOKE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEIBE, BROOKE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEIBE, BROOKE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3649/4629 Rpt: 3652/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEINES, ELIZABETH 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11215	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PROJECT MANAGER		9 Employer (See Instructions) JOHN H. ELTON, INC.
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENCK, DAVID Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92648	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CDI
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENCK, DAVID Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92648	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CDI
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENCK, GARRETT M Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, JOAN Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3650/4629 Rpt: 3653/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, JOAN <hr/> 6 Contributor address; City; State; Zip Code LA GRANGE, TX 78945	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, REBECCA <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) WEAVE ARCHITECTURE LLC
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, REBECCA <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) WEAVE ARCHITECTURE LLC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, REBECCA <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) WEAVE ARCHITECTURE LLC
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, REBECCA <hr/> Contributor address; City; State; Zip Code LA GRANGE, TX 78945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) WEAVE ARCHITECTURE LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3651/4629 Rpt: 3654/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKER, REBECCA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LA GRANGE, TX 78945		
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) WEAVE ARCHITECTURE LLC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKKAN, PHYLLIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHENKKAN, PHYLLIS	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code NEW YORK, NY 10028		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW YORK, NY 10028		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3652/4629 Rpt: 3655/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10028	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3653/4629 Rpt: 3656/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10028	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERL, EILEEN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERMAN, ASHLEY <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98117	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) OHSU
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERMER, RON <hr/> Contributor address; City; State; Zip Code HAMPTON, IA 50441	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3654/4629 Rpt: 3657/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHERMERHORN, JORDAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAM ANALYST		9 Employer (See Instructions) ZEMITEK LLC
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEUREN, CLAIRE <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHEYER, BILL <hr/> Contributor address; City; State; Zip Code UNION, KY 41091	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIAVONE, JOE <hr/> Contributor address; City; State; Zip Code HUNTINGTON BEACH, CA 92649	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) QBE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHICK, VIKKI <hr/> Contributor address; City; State; Zip Code TOWSON, MD 21286	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3655/4629 Rpt: 3658/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIEFER, JUDY <hr/> 6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84108	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIEFER, JUDY <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIERHORN, CARL <hr/> Contributor address; City; State; Zip Code KENT, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIERHORN, CARL <hr/> Contributor address; City; State; Zip Code KENT, OH 44240	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILD, KITTY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3656/4629 Rpt: 3659/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILD, KITTY <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILD, KITTY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILD, KITTY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILDGE, JANE <hr/> Contributor address; City; State; Zip Code COLTS NECK, NJ 07722-1301	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HOMEMAKER/VOLUNTEER		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILLACI, GENE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROGAMMER		Employer (See Instructions) REXEL USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3657/4629 Rpt: 3660/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILLER, LISA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ART		9 Employer (See Instructions) SELF
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILLER, LISA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ART		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIMBERG, WILLIAM <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80919	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHINZING, PATTY <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) CYPRESS PLACE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIOWITZ, JOSHUA <hr/> Contributor address; City; State; Zip Code GREAT NECK, NY 11021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TALENT MANAGER		Employer (See Instructions) SCHIOWITZ ARTISTS MANAGEMENT INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3658/4629 Rpt: 3661/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIPP, JANE <hr/> 6 Contributor address; City; State; Zip Code SANTA CLAUS, IN 47579	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIPPER, PATRICIA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHIPPER, PATRICIA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLANGER, CATHARINA <hr/> Contributor address; City; State; Zip Code JUPITER, FL 33477	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLEIFER, PETER <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) MACMILLAN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3659/4629 Rpt: 3662/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLEIFER, PETER <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11215	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) MACMILLAN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLEISS, VERONICA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLESINGER, JENNIFER <hr/> Contributor address; City; State; Zip Code TIMONIUM, MD 21093	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLESSINGER, DAVID <hr/> Contributor address; City; State; Zip Code MALM, DC 20000	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLISSMANN, MARGARET <hr/> Contributor address; City; State; Zip Code SAN RAFAEL, CA 94903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3660/4629 Rpt: 3663/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLIESSMANN, MARGARET <hr/> 6 Contributor address; City; State; Zip Code SAN RAFAEL, CA 94903	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLIESSMANN, MARGARET <hr/> Contributor address; City; State; Zip Code SAN RAFAEL, CA 94903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3661/4629 Rpt: 3664/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code BRENTWOOD, CA 94513		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BRENTWOOD, CA 94513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BRENTWOOD, CA 94513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BRENTWOOD, CA 94513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BRENTWOOD, CA 94513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3662/4629 Rpt: 3665/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLITT, WILLIAM <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3663/4629 Rpt: 3666/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLOSS, SIMA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10128	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) ARTIST /ADJUNCT PROFESSOR		9 Employer (See Instructions) HOSTOS COMMUNITY COLLEGE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLOSS, SIMA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARTIST /ADJUNCT PROFESSOR		Employer (See Instructions) HOSTOS COMMUNITY COLLEGE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLOTTERBECK, DIANA <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH ACADEMY OF FINE ARTS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLOTTERBECK, DIANA <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH ACADEMY OF FINE ARTS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLOTTERBECK, DIANA <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76116	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FORT WORTH ACADEMY OF FINE ARTS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3664/4629 Rpt: 3667/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHLUETER, STAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMAL, JOAN BRIDGET <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMANKE, LINDA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMANKE, LINDA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMANKE, LINDA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3665/4629 Rpt: 3668/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMETTERLING, ANDREW <hr/> 6 Contributor address; City; State; Zip Code MONTCLAIR, NJ 07042	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, CYNTHIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WORK COMP INVESTIGATOR		Employer (See Instructions) AIG
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, CYNTHIA <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WORK COMP INVESTIGATOR		Employer (See Instructions) AIG
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, DONNA <hr/> Contributor address; City; State; Zip Code JACKSON TOWNSHIP, NJ 08527-3725	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SPECIAL EDUCATION TEACHER		Employer (See Instructions) JACKSON BOARD OF EDUCATION
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, DONNA <hr/> Contributor address; City; State; Zip Code JACKSON TOWNSHIP, NJ 08527-3725	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SPECIAL EDUCATION TEACHER		Employer (See Instructions) JACKSON BOARD OF EDUCATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3666/4629 Rpt: 3669/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, HANNAH <hr/> 6 Contributor address; City; State; Zip Code HARTLAND, WI 53029	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETAIL MANAGER		9 Employer (See Instructions) TRADER JOES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, JONETTE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, JONETTE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, LEON <hr/> Contributor address; City; State; Zip Code SPOKANE, WA 99205	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, LEON <hr/> Contributor address; City; State; Zip Code SPOKANE, WA 99205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3667/4629 Rpt: 3670/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, RON <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, SHIRLEY <hr/> Contributor address; City; State; Zip Code MEADOWLAKES, TX 78654-6619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, SHIRLEY <hr/> Contributor address; City; State; Zip Code MEADOWLAKES, TX 78654-6619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, STEPHANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) NORTON ROSE FULBRIGHT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, SUZANNE <hr/> Contributor address; City; State; Zip Code MONTEREY, CA 93940	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3668/4629 Rpt: 3671/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code PALESTINE, TX 75802	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIDT, WILLIAM <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75802	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMIERER, ANNA <hr/> Contributor address; City; State; Zip Code CRESCENT CITY, CA 95531	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMOECKEL, CHRISTINE <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95834	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMOKER, RONNA <hr/> Contributor address; City; State; Zip Code ADDISON, TX 75001	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3669/4629 Rpt: 3672/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNAUTZ, LIZ <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) AUSTIN ISD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, DAWN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$29.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) OAKWOOD SURGERY CENTER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, JOHN <hr/> Contributor address; City; State; Zip Code RED ROCK, TX 78662-4616	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, JUDITH <hr/> Contributor address; City; State; Zip Code HEWLETT, NY 11557	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NYC. BD OF ED.
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, KATHY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254-2709	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3670/4629 Rpt: 3673/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, KATHY MINOR <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75254-2709	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) COMMUNITY RELATIONS		9 Employer (See Instructions) COMMUNITY HOMES FOR ADULTS
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, KATHY MINOR <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254-2709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNITY RELATIONS		Employer (See Instructions) COMMUNITY HOMES FOR ADULTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, MARIA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045-6420	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNEIDER, MARILYN <hr/> Contributor address; City; State; Zip Code CASTRO VALLEY, CA 94552-5038	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIST		Employer (See Instructions) LAWRENCE LIVERMORE NATIONAL LABORATORY
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNYDER, LINDA <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3671/4629 Rpt: 3674/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHNYDER, LINDA <hr/> 6 Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOENBAUM, ALAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOENBERGER, HEIDI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$128.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOENUNG, JULIE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOENUNG, JULIE <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3672/4629 Rpt: 3675/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOENUNG, JULIE <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS A&M UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOGGINS, ANTHONY <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) WBBDT
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOGGINS, ANTHONY <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) WBBDT
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOLZ, JANE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOLZ, JANE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3673/4629 Rpt: 3676/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHONS, JUDY <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92115	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOONOVER, CARLA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSIONAL		Employer (See Instructions) TMI
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOONOVER, CARLA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSIONAL		Employer (See Instructions) TMI
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOONOVER, CARLA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSIONAL		Employer (See Instructions) TMI
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOONOVER, CARLA <hr/> Contributor address; City; State; Zip Code PALO PINTO, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROFESSIONAL		Employer (See Instructions) TMI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3674/4629 Rpt: 3677/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOONOVER, CARLA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code PALO PINTO, TX 76484		
8 Principal occupation / Job title (See Instructions) PROFESSIONAL		9 Employer (See Instructions) TMI
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOONOVER, CARLA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PALO PINTO, TX 76484		
Principal occupation / Job title (See Instructions) PROFESSIONAL		Employer (See Instructions) TMI
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOPPE, MELINDA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) AUSTIN FAMILY CARE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHORNSTEIN, HERMAN	Amount of Contribution (\$) \$8.88
Contributor address; City; State; Zip Code CARPINTERIA, CA 93013-2639		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHORR, KELLY	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) COMPROLLER		Employer (See Instructions) SCHORR LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3675/4629 Rpt: 3678/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOTT, SASKIA <hr/> 6 Contributor address; City; State; Zip Code MERCER ISLAND, WA 98040	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOTT, SASKIA <hr/> Contributor address; City; State; Zip Code MERCER ISLAND, WA 98040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOTT, SASKIA <hr/> Contributor address; City; State; Zip Code MERCER ISLAND, WA 98040	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHOTT, SASKIA <hr/> Contributor address; City; State; Zip Code MERCER ISLAND, WA 98040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREIBER, JONNA <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$25.99
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3676/4629 Rpt: 3679/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREIBER, URSULA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78244	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CLERK III		9 Employer (See Instructions) SAN ANTONIO STATE HOSPITAL
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREIBER, URSULA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CLERK III		Employer (See Instructions) SAN ANTONIO STATE HOSPITAL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREINER, PEGGY <hr/> Contributor address; City; State; Zip Code BRISTOL, WI 53104	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREINER, PEGGY <hr/> Contributor address; City; State; Zip Code BRISTOL, WI 53104	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHREINER, PEGGY <hr/> Contributor address; City; State; Zip Code BRISTOL, WI 53104	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3677/4629 Rpt: 3680/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHRICK, BRAD <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA, CA 95403	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDEL, DALE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDEL, DALE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROEDER, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) JUST MIND
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHROLLER, ALEX <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) TECHNICAL TRAINER		Employer (See Instructions) PROS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3678/4629 Rpt: 3681/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUBERT, CHUCK <hr/> 6 Contributor address; City; State; Zip Code THORNTON, PA 19373	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) ABBVIE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUESSLER, MEG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CROWLEY ISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUETTE, RYAN <hr/> Contributor address; City; State; Zip Code WEBSTER, TX 77598	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) NTT DATA
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUETZ, DEBRA <hr/> Contributor address; City; State; Zip Code JARRELL, TX 76537	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUH, CRYSTAL <hr/> Contributor address; City; State; Zip Code CEDAR HILL, TX 75104	Amount of Contribution (\$) \$13.32
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3679/4629 Rpt: 3682/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTE, KIM <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79932	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) MAGELLAN
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTE, STEPHEN & MARGARET COOK <hr/> Contributor address; City; State; Zip Code CARMEL, CA 93923	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTZ, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTZ, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTZ, MARY EMILY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3680/4629 Rpt: 3683/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULZ, LESLIE <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) INSTRUCTOR		9 Employer (See Instructions) THE ART INSTITUTES
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULZ, LESLIE <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCESSIBILITY TESTER		Employer (See Instructions) CENGAGE
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULZ, LESLIE <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCESSIBILITY TESTER		Employer (See Instructions) CENGAGE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUMACHER, MAURA <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34109	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUMACHER, MAURA <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3681/4629 Rpt: 3684/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUMB, DAVID	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code OAKLAND, CA 94618		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUMM, BAILEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78721		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SEEKER STRATEGIES
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUN, NATALIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUN, NATALIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FAIR OAKS RANCH, TX 78015		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHURR, LISA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SARASOTA, FL 34242		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3682/4629 Rpt: 3685/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSSLER, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSSLER, MICHAEL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSTER, BRAD <hr/> Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSTER, BRAD <hr/> Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSTER, PHYLLIS <hr/> Contributor address; City; State; Zip Code RUIDOSO, NM 88345	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3683/4629 Rpt: 3686/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUSTER, PHYLLIS <hr/> 6 Contributor address; City; State; Zip Code RUIDOSO, NM 88345	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHUTZ, JOHN <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COMPUTER GUY		Employer (See Instructions) UNEMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWAB, ERIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BLUE HOUSE PRESCHOOL
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, CARRIE <hr/> Contributor address; City; State; Zip Code PARK CITY, UT 84098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) THE ADJACENT PROJECT		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, CARYL <hr/> Contributor address; City; State; Zip Code RANCHO PALOS VERDES, CA 90275	Amount of Contribution (\$) \$10.12
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3684/4629 Rpt: 3687/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, CLAIRE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code HOPATCONG, NJ 07843		
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) MIRIAM'S WELL HEALING LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, DOUGLAS	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code EL PASO, TX 79922		
Principal occupation / Job title (See Instructions) REAL ESTATE DEVELOPER		Employer (See Instructions) SOUTHWEST LAND DEVELOPMENT SERVICES, INC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, GARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NORTH BEND, WA 98045		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, GARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NORTH BEND, WA 98045		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, JILL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NAPLES, FL 34119		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3685/4629 Rpt: 3688/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, LISA B <hr/> 6 Contributor address; City; State; Zip Code YARDLEY, PA 19067	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, MELISSA <hr/> Contributor address; City; State; Zip Code BRIGHTON, MA 02135	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ASSISTANT		Employer (See Instructions) PSB
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, MICHAEL <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, MICHAEL <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, MONYA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PARALEGAL/OPERATIONS MANAGER		Employer (See Instructions) MATTHEWS & ASSOC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3686/4629 Rpt: 3689/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ, RANDALL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SUNLAND, CA 91040-1303		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWARTZ (PERSONAL), STUART	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCOTTHULSE PC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEGEL, AMY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NEW YORK, NY 10023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEITZER, CARRIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75214		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEITZER, STEVEN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code SNOHOMISH, WA 98290		
Principal occupation / Job title (See Instructions) STUDENT / NANNY		Employer (See Instructions) PRIVATE FAMILIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3687/4629 Rpt: 3690/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHWEITZER, STEVEN <hr/> 6 Contributor address; City; State; Zip Code SNOHOMISH, WA 98290	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) STUDENT / NANNY		9 Employer (See Instructions) PRIVATE FAMILIES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCIANO, DANIEL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TINSMAN & SCIANO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOGGINS, PENNY <hr/> Contributor address; City; State; Zip Code HURDLE MILLS, NC 27541	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTLAND, JAMES <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 75750	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) NEWMARK
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTLAND, JAMES <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 75750	Amount of Contribution (\$) \$1.24
Principal occupation / Job title (See Instructions) FINANCIAL ANALYST		Employer (See Instructions) NEWMARK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3688/4629 Rpt: 3691/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, ANNA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) JOHNS HOPKINS UNIVERSITY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, ANNA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) STUDENT		Employer (See Instructions) JOHNS HOPKINS UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, ARLENE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SHERWOOD, AR 72120		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, BRENETTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BRENETTA SCOTT
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, BRENETTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BRENETTA SCOTT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3689/4629 Rpt: 3692/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, DAVID <hr/> 6 Contributor address; City; State; Zip Code MORRISTOWN, IN 46161	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, DAVID <hr/> Contributor address; City; State; Zip Code MORRISTOWN, IN 46161	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, DAVID <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) FULLPOWER
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, DEON <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, GREGORY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75216	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) LEARFIELD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3690/4629 Rpt: 3693/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, HEATHER <hr/> 6 Contributor address; City; State; Zip Code EUGENE, OR 97405	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) SELF/UNIVERSITY OF OREGON
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, HEATHER <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97405	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF/UNIVERSITY OF OREGON
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, HEATHER <hr/> Contributor address; City; State; Zip Code EUGENE, OR 97405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF/UNIVERSITY OF OREGON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, JENNIFER <hr/> Contributor address; City; State; Zip Code WILMINGTON, NC 28409	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, KENT <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94304	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3691/4629 Rpt: 3694/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, KENT <hr/> 6 Contributor address; City; State; Zip Code PALO ALTO, CA 94304	7 Amount of Contribution (\$) \$85.00
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) UNEMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LAUREL <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, LORNA <hr/> Contributor address; City; State; Zip Code LAKE STEVENS, WA 98258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, M <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) USAF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, M <hr/> Contributor address; City; State; Zip Code CIBOLO, TX 78108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) USAF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3692/4629 Rpt: 3695/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, MILDA <hr/> 6 Contributor address; City; State; Zip Code CIBOLO, TX 78108	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, ROSA LEE K <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, ROSA LEE K <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, SHIRLEY <hr/> Contributor address; City; State; Zip Code MAPLE GROVE, MN 55311	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, VAL <hr/> Contributor address; City; State; Zip Code GREENFIELD, MA 01301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, VAUGHAN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) UNIVERSITY OF TEXAS
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT WILSON, SUSAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT WILSON, SUSAN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOVILL, BECKY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOVILL, BECKY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3694/4629 Rpt: 3697/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRUTON, CHRIS <hr/> 6 Contributor address; City; State; Zip Code RANCHO CORDOVA, CA 95670	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRUTON, CHRIS <hr/> Contributor address; City; State; Zip Code RANCHO CORDOVA, CA 95670	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCUDDER, KENDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCUDDER, KENDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCUDDER, KENDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3695/4629 Rpt: 3698/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCUDDER, KENDALL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCUDDER, KENDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$48.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCUDDER, KENDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEALE, LAUREL <hr/> Contributor address; City; State; Zip Code KINDE, MI 48445	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEALE, LAUREL <hr/> Contributor address; City; State; Zip Code KINDE, MI 48445	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3696/4629 Rpt: 3699/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEALS, WYLEY <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76002	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SAP BUSINESS CONSULTANT		9 Employer (See Instructions) MOHAWK IND
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEALS, WYLEY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SAP BUSINESS CONSULTANT		Employer (See Instructions) MOHAWK IND
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEALS, WYLEY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SAP BUSINESS CONSULTANT		Employer (See Instructions) MOHAWK IND
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAMAN, JOHN <hr/> Contributor address; City; State; Zip Code PERRYTON, TX 79070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UGA/SREL		Employer (See Instructions) UGA/SREL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEARS, CYNTHIA <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21212	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) JOHNS HOPKINS UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3697/4629 Rpt: 3700/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEARS, GERRIE <hr/> 6 Contributor address; City; State; Zip Code SAN JUAN CAPISTRANO, CA 92675	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEAWELL, ELLIS <hr/> Contributor address; City; State; Zip Code NORTH CAPE MAY, NJ 08204	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEBASTIANI, MARK <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22203	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEEBERGER, KRISTIN <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21217	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEEKELY, BOB & GABRIELLE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SR VP & CFO		Employer (See Instructions) LEGACY MEDICAL CONSULTANTS LP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3698/4629 Rpt: 3701/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGALL, PETE <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60660-1310	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) ASST. REGISTRAR		9 Employer (See Instructions) UNIVERSITY OF CHICAGO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGNITZ, CARMEN <hr/> Contributor address; City; State; Zip Code MONTE SERENO, CA 95030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGNITZ, CARMEN <hr/> Contributor address; City; State; Zip Code MONTE SERENO, CA 95030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGNITZ, CARMEN <hr/> Contributor address; City; State; Zip Code MONTE SERENO, CA 95030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGRAVE-DALY, ELIZABETH <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90405	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3699/4629 Rpt: 3702/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGURA, BERNADETTE <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79903	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LEGAL AID
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEGURA, BERNADETTE <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LEGAL AID
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEHN, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEHNERT, MATT <hr/> Contributor address; City; State; Zip Code LINCOLN, NE 68508	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIDEN, SHERRY <hr/> Contributor address; City; State; Zip Code LENEXA, KS 66215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3700/4629 Rpt: 3703/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIFERT, SAUNDRA <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PEDIATRICIAN		9 Employer (See Instructions) SHANNON CLINIC
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIFERT, SAUNDRA <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PEDIATRICIAN		Employer (See Instructions) SHANNON CLINIC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIGLER, JIM <hr/> Contributor address; City; State; Zip Code WEST COLUMBIA, SC 29169	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIGRIST, STEVEN <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AIRLINE PILOT		Employer (See Instructions) ENVOY AIR
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIGRIST, STEVEN <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AIRLINE PILOT		Employer (See Instructions) ENVOY AIR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3701/4629 Rpt: 3704/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIKETOVA, DINARA <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77494	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FINANCE ADVISOR		9 Employer (See Instructions) SHELL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEILER, LESLIE CARL <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) BAKER INTERNATIONAL INSURANCE AGENCY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEILER, LESLIE CARL <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) BAKER INTERNATIONAL INSURANCE AGENCY
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEILER, LESLIE CARL <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) BAKER INTERNATIONAL INSURANCE AGENCY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEILHEIMER, DAN <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3702/4629 Rpt: 3705/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELBY, MARY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELDIN, ELLEN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) EMCARE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELDIN, ELLEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) EMCARE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELF, DAPHNE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75081-5345		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELIGMAN, CHARLES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737-9048		
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3703/4629 Rpt: 3706/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLERS, TRACY <hr/> 6 Contributor address; City; State; Zip Code ROWLETT, TX 75030	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLERS, TRACY <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLS, GREG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CIVIL SERVICE		Employer (See Instructions) INTERNAL REVENUE SERVICE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLS, GREG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CIVIL SERVICE		Employer (See Instructions) INTERNAL REVENUE SERVICE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLS, GREG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CIVIL SERVICE		Employer (See Instructions) INTERNAL REVENUE SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3704/4629 Rpt: 3707/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELVERA, SERGIO <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77003	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEMINET, PHILIPPE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78739-1623	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) ST. EDWARD'S UNIVERSITY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDEJO, MARTHA <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDEJO, MARTHA <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDERS, WARREN <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSIC TEACHER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3705/4629 Rpt: 3708/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDERS, WARREN <hr/> 6 Contributor address; City; State; Zip Code MEDFORD, MA 02155	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) MUSIC TEACHER		9 Employer (See Instructions) SELF-EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDERS, WARREN <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) MUSIC TEACHER		Employer (See Instructions) SELF-EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDERS, WARREN <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSIC TEACHER		Employer (See Instructions) SELF-EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDERS, WARREN <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) MUSIC TEACHER		Employer (See Instructions) SELF-EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENDERS, WARREN <hr/> Contributor address; City; State; Zip Code MEDFORD, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MUSIC TEACHER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3706/4629 Rpt: 3709/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENEGAL, CHRIS <hr/> 6 Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642-2601	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE DEVELOPMENT		9 Employer (See Instructions) IDG
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENGLAUB, ASHLYN <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEW CANEY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENSTAD, SUSAN <hr/> Contributor address; City; State; Zip Code RICHMOND, CA 94804	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEPULVEDA, ESMERALDA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UTSW MEDICAL CENTER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERAPHIN, ELIZABETH <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90066	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3707/4629 Rpt: 3710/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERCOMBE, LAUREL	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code SEATTLE, WA 98105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERNA, BALTAZAR	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SERNA AND SERNA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERNA, BALTAZAR	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SERNA AND SERNA
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERNA, DIANA	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76133		
Principal occupation / Job title (See Instructions) RADIATION THERAPIST		Employer (See Instructions) TEXAS CANCER SPECIALISTS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEROCKI, SAMANTHA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78741		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) EXPEDIA GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3708/4629 Rpt: 3711/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERRERO, GINETTE <hr/> 6 Contributor address; City; State; Zip Code COLUMBIA, MD 21045	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) A&G PHARMACEUTICAL
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERTOKA, DOLORES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERVAAS, CURTIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERVAAS, CURTIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERVAAS, CURTIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3709/4629 Rpt: 3712/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SERVAGE, KELLY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75208	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POSTDOCTORAL ASSOCIATE		9 Employer (See Instructions) HOWARD HUGHES MEDICAL INSTITUTE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SESHOLTZ, RICHARD <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33436-6370	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETH, HOLLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) NOMAD HEALTH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, LIDA <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, LIDA <hr/> Contributor address; City; State; Zip Code COLUMBUS, OH 43204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3710/4629 Rpt: 3713/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, LIDA <hr/> 6 Contributor address; City; State; Zip Code COLUMBUS, OH 43204	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, POOJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, POOJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, POOJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, POOJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3711/4629 Rpt: 3714/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, POOJA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) LAW OFFICES
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, POOJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHI, SHELLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETHY, ANIL <hr/> Contributor address; City; State; Zip Code ISSAQUAH, WA 98027	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SETZER, BETH <hr/> Contributor address; City; State; Zip Code STATESVILLE, NC 28625	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BETH R SETZER ATTORNEY AT LAW, PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3712/4629 Rpt: 3715/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEUBERT, DONALD <hr/> 6 Contributor address; City; State; Zip Code MEDFORD, NY 11763	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEUBERT, EMELIA <hr/> Contributor address; City; State; Zip Code BLACKWELL, OK 74631	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEVIER, BRENDA <hr/> Contributor address; City; State; Zip Code HURST, TX 76054	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEXTON, BONNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) TRIPLE CROWN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMOUR, CYNTHIA <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3713/4629 Rpt: 3716/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMOUR, JILL <hr/> 6 Contributor address; City; State; Zip Code TEMPE, AZ 85283	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMOUR, SALLY <hr/> Contributor address; City; State; Zip Code LARKSPUR, CA 94939	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEYMOUR, SALLY <hr/> Contributor address; City; State; Zip Code LARKSPUR, CA 94939	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHADDIX, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHADDIX, JAMES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3714/4629 Rpt: 3717/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHADDIX, JAMES	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77024		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHADDIX, JAMES	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHADDIX, JAMES	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77252		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAFER, CHARLENE	Amount of Contribution (\$) \$15.25
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAFER, ELIZABETH	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code SAUGERTIES, NY 12477-1704		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3715/4629 Rpt: 3718/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAFFERS, DEBRA <hr/> 6 Contributor address; City; State; Zip Code BATON ROUGE, LA 70820	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAH, FAYYAZ <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PRODUCT MGMT		Employer (See Instructions) CAREERBUILDER
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAH, JULIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) EAGLE BAY ADVISORS, LLC
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAH, NANCY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) GARTNER
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAH, NANCY <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) OPERATIONS		Employer (See Instructions) GARTNER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3716/4629 Rpt: 3719/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAHANI, NOMITA <hr/> 6 Contributor address; City; State; Zip Code SARATOGA, CA 95070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE SALES		9 Employer (See Instructions) COMPASS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAHID, DILSHAD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ACCENTURE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAIKH, AMINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) AMINA SHAIKH
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAIKH, AMINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) AMINA SHAIKH
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAIKH, SAKIB <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) AMERICAN PAYROLL ASSOCIATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3717/4629 Rpt: 3720/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAM, ALEXUS <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77384	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMA, AMANDA <hr/> Contributor address; City; State; Zip Code TIGARD, OR 97224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMBURGER, CRISTAN <hr/> Contributor address; City; State; Zip Code COMMERCE, TX 75428	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LEGAL SECRETARY		Employer (See Instructions) LAW OFFICE OF STEVE SHIPP
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMBURGER, CRISTAN <hr/> Contributor address; City; State; Zip Code COMMERCE, TX 75428	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) DALLAS COUNTY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMSI, FARRUKH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS CLINIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3718/4629 Rpt: 3721/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMSI, FARRUKH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) TEXAS CLINIC
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMSI, FARRUKH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS CLINIC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMSI, FARRUKH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS CLINIC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAMSI, FARRUKH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) TEXAS CLINIC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANAFELT, CHRISTIE <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75081	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CATALYST PHYSICIAN GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3719/4629 Rpt: 3722/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANAHAN, LINDA <hr/> 6 Contributor address; City; State; Zip Code CHOCTAW, OK 73020	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANAHAN, LINDA <hr/> Contributor address; City; State; Zip Code CHOCTAW, OK 73020	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANAHAN, PAUL <hr/> Contributor address; City; State; Zip Code DEWITT, NY 13224	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANDOR, JOHN M <hr/> Contributor address; City; State; Zip Code EASTON, PA 18042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COOK		Employer (See Instructions) PARKHURST
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANK, ERIN <hr/> Contributor address; City; State; Zip Code WACO, TX 76701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ERIN B. SHANK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3720/4629 Rpt: 3723/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANK, ERIN	7 Amount of Contribution (\$) \$45.00
6 Contributor address; City; State; Zip Code WACO, TX 76701		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ERIN B. SHANK, P.C.
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANK, ERIN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code WACO, TX 76701		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ERIN B. SHANK
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANK COVIELLO, JESSICA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SPRING, TX 77389		
Principal occupation / Job title (See Instructions) ASSOC DEAN		Employer (See Instructions) UTH
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANKLIN, M LOUISE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANKLIN-SPOCK, HEIDI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) AGING LIFE CARE MANAGER		Employer (See Instructions) SPOCK CARE MANAGEMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3721/4629 Rpt: 3724/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANNON, LINDA <hr/> 6 Contributor address; City; State; Zip Code WINTER GARDEN, FL 34787	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANNON, NINA <hr/> Contributor address; City; State; Zip Code ROCKPORT, TX 78382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAO, TZU FANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAO, TZU FANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, CAROL <hr/> Contributor address; City; State; Zip Code FRAMINGHAM, MA 01701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3722/4629 Rpt: 3725/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, GABRIEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, JOANNE <hr/> Contributor address; City; State; Zip Code WATERTOWN, MA 02472	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, LEAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS/ HARRIS COUNTY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, LEAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-1136	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, LEAH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS/ HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3723/4629 Rpt: 3726/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, TERESA <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TERESA SHAPIRO LAW
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAPIRO, TERESA <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TERESA SHAPIRO LAW
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARKEY, KAREN <hr/> Contributor address; City; State; Zip Code REDLANDS, CA 92374	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARKIS, GLADYS M <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MENTAL HEALTH PROFESSIONAL		Employer (See Instructions) INTEGRAL CARE (AUSTIN)
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARKY, NOLA <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70808	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3724/4629 Rpt: 3727/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARMA, PRIYA <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) BUSINESS WOMAN		9 Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARMA, SANGEETA <hr/> Contributor address; City; State; Zip Code SCARSDALE, NY 10583	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) NYC HHC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARMS, DINESH <hr/> Contributor address; City; State; Zip Code FORT MYERS, FL 33912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARMS, DINESH <hr/> Contributor address; City; State; Zip Code FORT MYERS, FL 33912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARP, AMY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELSNEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3725/4629 Rpt: 3728/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARP, AMY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARP, DIANA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARP, DIANA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARP, DIANA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPE, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PLANNING FACILITATOR		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3726/4629 Rpt: 3729/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPE, MARY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703		
8 Principal occupation / Job title (See Instructions) PLANNING FACILITATOR		9 Employer (See Instructions) SELF-EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3727/4629 Rpt: 3730/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHARPHORN, ELLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHATTUCK, LOLA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3728/4629 Rpt: 3731/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHATTUCK, LOLA <hr/> 6 Contributor address; City; State; Zip Code SEGUIN, TX 78155	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHATTUCK, LOLA <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAUKAT, GIGI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, CAREY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFES, TX 78132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, CAREY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFES, TX 78132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3729/4629 Rpt: 3732/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) DENTAL OFFICE MANAGER		9 Employer (See Instructions) RIATA DENTAL
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, JOHN <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRANSPORTATION PLANNER		Employer (See Instructions) CITY OF SEATTLE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, JOHN <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRANSPORTATION PLANNER		Employer (See Instructions) CITY OF SEATTLE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, KELLY <hr/> Contributor address; City; State; Zip Code POMPTON PLAINS, NJ 07444	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, LEONORA <hr/> Contributor address; City; State; Zip Code LIVE OAK, TX 78233	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3730/4629 Rpt: 3733/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MARGO	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77066		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MARILYN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KAPOLEI, HI 96707		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, REP. PENNY	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code HOUSTON, TX 76292		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, SALLY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code MANCHESTER CENTER, VT 05255		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, TERRY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3731/4629 Rpt: 3734/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, TERRY J <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, TERRY J <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEAKS, ROBERT <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAB TECH		Employer (See Instructions) ELECTRO PLATE CIRCUITRY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEAKS, ROBERT <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAB TECH		Employer (See Instructions) ELECTRO PLATE CIRCUITRY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEAKS, ROBERT <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAB TECH		Employer (See Instructions) ELECTRO PLATE CIRCUITRY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3732/4629 Rpt: 3735/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEAKS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75060	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LAB TECH		9 Employer (See Instructions) ELECTRO PLATE CIRCUITRY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEALEY, ALESIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STAFFING & RECRUITING		Employer (See Instructions) EPSI STAFFING
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEALEY, ALESIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) STAFFING & RECRUITING		Employer (See Instructions) EPSI STAFFING
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEALEY, ALESIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STAFFING & RECRUITING		Employer (See Instructions) EPSI STAFFING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEATS, NED <hr/> Contributor address; City; State; Zip Code MISSION, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3733/4629 Rpt: 3736/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEATS, NED <hr/> 6 Contributor address; City; State; Zip Code MISSION, TX 78574	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEATS, NED <hr/> Contributor address; City; State; Zip Code MISSION, TX 78574	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEDY, CHARLOTTE <hr/> Contributor address; City; State; Zip Code HUDSON, NY 12534	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LITERARY AGENT		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, KATHRYN <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02140	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) CDM SMITH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHY, JIM <hr/> Contributor address; City; State; Zip Code REDONDO BEACH, CA 90277	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3734/4629 Rpt: 3737/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEETS, JANET <hr/> 6 Contributor address; City; State; Zip Code ST LOUIS, MO 63129	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEETS, JANET <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEETS, JANET <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63129	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEETS, JANET <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63129	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEETS, JANET <hr/> Contributor address; City; State; Zip Code ST LOUIS, MO 63129	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3735/4629 Rpt: 3738/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEETS, RUTH <hr/> 6 Contributor address; City; State; Zip Code NEW PALTZ, NY 12561	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEIKH, SOFIA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) AVENSIS ENERGY SERVICES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEIKHOESLAMI, BAHRAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEINIUK, EILEEN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90272	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELDON, ALBERT <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3736/4629 Rpt: 3739/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELDON, ALBERT <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98105	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELDON, ROBERT <hr/> Contributor address; City; State; Zip Code THE HILLS, TX 78738	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELDON, ROBERT <hr/> Contributor address; City; State; Zip Code THE HILLS, TX 78738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELDON-DANTE, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02140	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) APRIORI TECHNOLOGIES INC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELLENBERGER, ELAINE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3737/4629 Rpt: 3740/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELLENBERGER, ELAINE <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77708	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELLEY, DOROTHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELLY, CHARLES R <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, JANE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, KRISTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3738/4629 Rpt: 3741/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, SUSAN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78715		
8 Principal occupation / Job title (See Instructions) TECHNICAL WRITER		9 Employer (See Instructions) GRAVITANT
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, SUSAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78715		
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) GRAVITANT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHENNY, PHYLLIS	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LEESBURG, VA 20175		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHENOY, REKHA	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code PLANO, TX 75025		
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) PRISM HEALTH CARE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARDSON, RODNEY	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code NASHUA, NH 03062		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3739/4629 Rpt: 3742/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, DORIS <hr/> Contributor address; City; State; Zip Code LIBERTY TWP, OH 45011	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, DORIS <hr/> Contributor address; City; State; Zip Code LIBERTY TWP, OH 45011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, JULIANNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, JULIANNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3740/4629 Rpt: 3743/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, ROBERTA <hr/> 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPHERD, SHERMEATHIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) SR. QUALITY AUDITOR		Employer (See Instructions) M
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, FLORITA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, JOSEPH <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, JOSEPH <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3741/4629 Rpt: 3744/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code CUERO, TX 77954	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, JOSEPH <hr/> Contributor address; City; State; Zip Code CUERO, TX 77954	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPARD, PATRICK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PILOT		Employer (See Instructions) DELTA AIR LINES
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPPE, SUZANNE <hr/> Contributor address; City; State; Zip Code CHARLOTTESVILLE, VA 22901	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UVA HOSPITAL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHER, BRENDON <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90405	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRODUCER		Employer (See Instructions) INTELLIGENT ENTERTAINMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3742/4629 Rpt: 3745/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHER, MARY <hr/> 6 Contributor address; City; State; Zip Code ALAMO, CA 94507	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) ARTIST AGENT		9 Employer (See Instructions) ART LICENSING PROPERTIES LLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHER, PETER <hr/> Contributor address; City; State; Zip Code SHORELINE, WA 98133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) PERKINS COIE LLP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERBURNE, BRADFORD <hr/> Contributor address; City; State; Zip Code WEST HARTFORD, CT 06119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HARTFORD PATHOLOGY ASSOCIATES PC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERE, SYED <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERIDAN, PAMELA <hr/> Contributor address; City; State; Zip Code FILLMORE, CA 93015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) VCCCD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3743/4629 Rpt: 3746/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERIDAN, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75243	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CLINICAL RESEARCH ASSOCIATE		9 Employer (See Instructions) PRA HEALTH SCIENCES
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERIDAN, SHELLEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH ASSOCIATE		Employer (See Instructions) PRA HEALTH SCIENCES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERKOW, MARK <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60659-2192	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) NORTHEASTERN ILLINOIS UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CAROLINE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CAROLINE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3744/4629 Rpt: 3747/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CAROLINE <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76248	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CAROLINE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CAROLINE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CHRIS <hr/> Contributor address; City; State; Zip Code ANACORTES, WA 98221	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) C SHERMAN AV
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CHRIS <hr/> Contributor address; City; State; Zip Code ANACORTES, WA 98221	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) C SHERMAN AV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3745/4629 Rpt: 3748/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code CHUGIAK, AK 99567	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SP. ED. TEACHING ASSISTANT		9 Employer (See Instructions) ANCHORAGE SCHOOL DISTRICT
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CHRISTINE <hr/> Contributor address; City; State; Zip Code CHUGIAK, AK 99567	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SP. ED. TEACHING ASSISTANT		Employer (See Instructions) ANCHORAGE SCHOOL DISTRICT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, CYNTHIA <hr/> Contributor address; City; State; Zip Code PANA, IL 62557	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) CYNTHIA SHERMAN
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERRIFF, RENEE <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90016	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERRIFF, VALARIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3746/4629 Rpt: 3749/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERWOOD, KRISTA <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22303	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) GOVERNMENT
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERWOOD, LADONNA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERWOOD, LADONNA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERWOOD, LADONNA JOY <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) LL TRANS LLC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERWOOD, LADONNA JOY <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) LL TRANS LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3747/4629 Rpt: 3750/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHETH, SHREYA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHETLER, ANN <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DIETITIAN		Employer (See Instructions) PEARLAND ISD
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIBATA, EILEEN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIBATA, EILEEN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIEL-REARDON, CATHY <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3748/4629 Rpt: 3751/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIEL-REARDON, CATHY <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIEL-REARDON, CATHY <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60660	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIELDS, ASHLEY <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37909	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) UT-BATTELLE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIELDS, C.B. <hr/> Contributor address; City; State; Zip Code MONTE ALTO, TX 78538	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIELDS, C.B. <hr/> Contributor address; City; State; Zip Code MONTE ALTO, TX 78538	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3749/4629 Rpt: 3752/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIELDS, JUDITH	7 Amount of Contribution (\$) \$180.00
6 Contributor address; City; State; Zip Code BELTON, TX 76513		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIELDS, REBECCA	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIELDS, REBECCA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIH, HELEN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) FLOW-OF-LIGHT NATURAL HEALTH
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIH, HELEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) FLOW-OF-LIGHT NATURAL HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3750/4629 Rpt: 3753/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIHADDEH, JUANITA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77041	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATOR		9 Employer (See Instructions) EARTH ENGINEERING INC
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHILLING, PAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIMAMOTO, KATHRYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIMAMOTO, KATHRYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIMCHICK, ANASTASIA <hr/> Contributor address; City; State; Zip Code CHERRY HILL, NJ 08002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3751/4629 Rpt: 3754/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIMEK, BECKY <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPLEY-CROW, LYNN <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, IN 47403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPLEY-CROW, LYNN <hr/> Contributor address; City; State; Zip Code BLOOMINGTON, IN 47403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPP, BILL <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 95739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPP, BILL <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 95739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3752/4629 Rpt: 3755/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPP, BILL <hr/> 6 Contributor address; City; State; Zip Code TUCSON, AZ 95739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPP, ROBERT <hr/> Contributor address; City; State; Zip Code LILBURN, GA 30047	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPTON, LYLE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MATHWORKS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRKOFF, JEAN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRKOFF, JEAN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3753/4629 Rpt: 3756/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRKOFF, JEAN <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97225	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY, BARRETT <hr/> Contributor address; City; State; Zip Code TOLLAND, CT 06084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY, CAROLYN <hr/> Contributor address; City; State; Zip Code LEXINGTON, TX 78947	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY, CAROLYN <hr/> Contributor address; City; State; Zip Code LEXINGTON, TX 78947	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY, CAROLYN <hr/> Contributor address; City; State; Zip Code LEXINGTON, TX 78947	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3754/4629 Rpt: 3757/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY, CHARLES <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007-1715	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) COMPUTER SCIENTIST		9 Employer (See Instructions) FINASTRA
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205-3917	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) JONES FAMILY FARM
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) JONES FAMILT FARM
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205-3917	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) JONES FAMILY FARM
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, DEBRA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) JONES FAMILT FARM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3755/4629 Rpt: 3758/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, DEBRA	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) JONES FAMILY FARM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, NANCY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SHIVERS & SHIVERS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, NANCY	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SHIVERS & SHIVERS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVERS, WADE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code DALZELL, SC 29040		
Principal occupation / Job title (See Instructions) CARETAKER		Employer (See Instructions) MOTHER
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHNAYDER, GEORGE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FRESH MEADOWS, NY 11365		
Principal occupation / Job title (See Instructions) BIOMEDICAL EQUIPMENT ENGINEER		Employer (See Instructions) RIVERSIDE HEALTHCARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3756/4629 Rpt: 3759/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOCKLEY, ED <hr/> 6 Contributor address; City; State; Zip Code LEWES, DE 19958	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) MUSICIAN		9 Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOEMAKER, KORTLYN <hr/> Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49503	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ESTHETICIAN		Employer (See Instructions) KORTLYN SHOEMAKER
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOEMAKER, RODNEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PURCHASING		Employer (See Instructions) PENTAIR
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOHER, ZACH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PRINCIPAL / CONTRIBUTOR		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, BETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) RICE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3757/4629 Rpt: 3760/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, BETH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) RICE UNIVERSITY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, BETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$49.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) RICE UNIVERSITY
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, KIT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, KIT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, KIT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3758/4629 Rpt: 3761/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, KIT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, KIT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, LAURIE <hr/> Contributor address; City; State; Zip Code MURPHY, TX 75094	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) OPENTEXT
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, LAURIE <hr/> Contributor address; City; State; Zip Code MURPHY, TX 75094	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) OPENTEXT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, LAURIE <hr/> Contributor address; City; State; Zip Code MURPHY, TX 75094	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) OPENTEXT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3759/4629 Rpt: 3762/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOOK, LAURIE <hr/> 6 Contributor address; City; State; Zip Code MURPHY, TX 75094	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) OPENTEXT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORB, ALLISON <hr/> Contributor address; City; State; Zip Code ROUND HILL, VA 20141	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CMT		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORE, DEBRA <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60203	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REGIONAL ADMINISTRATOR		Employer (See Instructions) FEDERAL GOVERNMENT
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, AMANDA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) EA
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, AMANDA <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) EA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3760/4629 Rpt: 3763/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, JIM <hr/> 6 Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, NIKKI <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, NIKKI <hr/> Contributor address; City; State; Zip Code AZLE, TX 76020	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, SARA <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORT, SARA <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75904	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3761/4629 Rpt: 3764/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHORTALL, ANNE <hr/> 6 Contributor address; City; State; Zip Code RICHFIELD, MN 55423	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOUGH, CAROL <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOUGH, CAROL <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOWERMAN, LINDA LEE <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, OR 97530	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHRADER, JUSTIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77046	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SHRADER & ASSOCIATES, L.L.P.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3762/4629 Rpt: 3765/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHRESTHA, SANJEEB <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76132-3751	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) TDDC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHROUT, WILL <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BARTENDER		Employer (See Instructions) THE TACK ROOM
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHROUT, WILL <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BARTENDER		Employer (See Instructions) THE TACK ROOM
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUEY, TERESA <hr/> Contributor address; City; State; Zip Code BRENHAM, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PARENT		Employer (See Instructions) STAY AT HOME PARWNT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUKLA, UDAYAN <hr/> Contributor address; City; State; Zip Code REDMOND, WA 98052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) POINT B

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3763/4629 Rpt: 3766/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHULMAN, SUSAN <hr/> 6 Contributor address; City; State; Zip Code HIGHLAND PARK, IL 60035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) NORTH SUBURBAN LEGAL AID CLINI
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUMWAY, LORETTA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ESCROW OFFICER		Employer (See Instructions) MN TITLE COMPANY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUMWAY, LORETTA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ESCROW OFFICER		Employer (See Instructions) MN TITLE COMPANY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUSTER, BARBARA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUTE, BILL <hr/> Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) COLLEGE PROFESSOR		Employer (See Instructions) SAN ANTONIO COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3764/4629 Rpt: 3767/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIBLEY, MARILYN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75215	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) THE CONTAINER STORE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIBLEY, MARILYN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) THE CONTAINER STORE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIBLEY, ROSE <hr/> Contributor address; City; State; Zip Code MEADOWS PLACE, TX 77477	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIBLEY, TOM <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUE, HAROON <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092-8843	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3765/4629 Rpt: 3768/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUE, NAHID	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code WYLIE, TX 75098		
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UNT DALLAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUE, NAHID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WYLIE, TX 75098		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNT DALLAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUE, NAHID	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code WYLIE, TX 75098		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNT DALLAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUE, NAHID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WYLIE, TX 75098		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNT DALLAS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76002		
Principal occupation / Job title (See Instructions) ROUTING SPECIALIST		Employer (See Instructions) DALLAS COUNTY SCHOOLS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3766/4629 Rpt: 3769/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PLANNER		9 Employer (See Instructions) AMERICAN AIRLINES
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) AMERICAN AIRLINES
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) AMERICAN AIRLINES
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ROUTING SPECIALIST		Employer (See Instructions) DALLAS COUNTY SCHOOLS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3767/4629 Rpt: 3770/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PLANNER		9 Employer (See Instructions) AMERICAN AIRLINES
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) AMERICAN AIRLINES
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PLANNER		Employer (See Instructions) AMERICAN AIRLINES
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, AFTAB <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76002	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, EIMAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) AMERICAN EXPRESS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3768/4629 Rpt: 3771/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL <hr/> 6 Contributor address; City; State; Zip Code STATEN ISLAND, NY 10303	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		9 Employer (See Instructions) CITY OF NEW YORK
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDDIQUI, NURUL <hr/> Contributor address; City; State; Zip Code STATEN ISLAND, NY 10303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		Employer (See Instructions) CITY OF NEW YORK
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDELL, KATHRIN <hr/> Contributor address; City; State; Zip Code SCOTTS VALLEY, CA 95066	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PAMF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIDRONY, VIRGINIA (GINNY) <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEBERT, MIKE <hr/> Contributor address; City; State; Zip Code EASTLAND, TX 76448	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3769/4629 Rpt: 3772/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEFERT, SALLY <hr/> 6 Contributor address; City; State; Zip Code SUGAR GROVE, PA 16350	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGAL, SANDRA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PERSONAL MANAGER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGEL, DANIEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) CCTHC INC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGEL, LOIS <hr/> Contributor address; City; State; Zip Code LATHAM, NY 12110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGEL, MARK <hr/> Contributor address; City; State; Zip Code REDWOOD CITY, CA 94061	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3770/4629 Rpt: 3773/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGEL, MARK <hr/> 6 Contributor address; City; State; Zip Code REDWOOD CITY, CA 94061	7 Amount of Contribution (\$) \$18.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGFRIED, ROBERT H. <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SIEGFRIED ENGINEERING & CONSTRUCTION, LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGLE, CARYL <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGLE, CARYL <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEGMUND, JULIE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		Employer (See Instructions) JULIE SIEGMUND

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3771/4629 Rpt: 3774/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS, LINDA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS-KENNEDY, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MOTT MACDONALD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS-KENNEDY, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MOTT MACDONALD
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS-KENNEDY, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MOTT MACDONALD
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS-KENNEDY, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MOTT MACDONALD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3772/4629 Rpt: 3775/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS-KENNEDY, LAURA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) MOTT MACDONALD
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEMERS-KENNEDY, LAURA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MOTT MACDONALD
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIEVER, BETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGEE, THOMAS <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGEE, THOMAS <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) COLLECTION OFFICER TREASURER		Employer (See Instructions) JEFFERSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3773/4629 Rpt: 3776/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGEE, THOMAS <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77705	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGEE, THOMAS <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) COLLECTION OFFICER TREASURER		Employer (See Instructions) JEFFERSON COUNTY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILBERMAN, CINDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILHA, EDWARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILHA, EDWARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3774/4629 Rpt: 3777/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILHA, EDWARD	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78749		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILHA, EDWARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILHA, EDWARD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILKES, JOANN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92119		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) SAN DIEGO STATE UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, ALICE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ABILENE, TX 79603		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3775/4629 Rpt: 3778/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, DANIELA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78741	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) AUSTIN POLICY COORDINATOR		9 Employer (See Instructions) WORKERS DEFENSE ACTION FUND
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, JONI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOICE OVER ACTOR		Employer (See Instructions) SILVA LINING VOICE OVER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, JOSEPH <hr/> Contributor address; City; State; Zip Code MARLBOROUGH, CT 06447	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, JUAN <hr/> Contributor address; City; State; Zip Code ODESSA, TX 79760	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, LIZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3776/4629 Rpt: 3779/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVA, ZEKE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SOUTH TEXAS RADIOLOGY GROUP
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVER, BERNARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVER, BERNARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVER, BERNARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVER, BERNARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3777/4629 Rpt: 3780/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVER, JENIA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVER, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) PAUL SILVER INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVERSTEIN, ALISON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVERSTEIN, SANDRA <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92122	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SILVERSTEIN, SANDRA <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92122	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3778/4629 Rpt: 3781/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIM, MAY <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIM, STEPHANIE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) STEPHANIE C. SIM, M.D., P.A.
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIME, PETER <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) LIBRARY SUPERVISOR		Employer (See Instructions) CITY OF GRAND PRAIRIE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIME, PETER <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) LIBRARY SUPERVISOR		Employer (See Instructions) CITY OF GRAND PRAIRIE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMECEK, DIANE <hr/> Contributor address; City; State; Zip Code YORKTOWN, TX 78164	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3779/4629 Rpt: 3782/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMECEK, DIANE <hr/> 6 Contributor address; City; State; Zip Code YORKTOWN, TX 78164	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMES, VERNA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMES, VERNA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMON, VINCENT <hr/> Contributor address; City; State; Zip Code NEWPORT COAST, CA 92657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ALISA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) TARRANT COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3780/4629 Rpt: 3783/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ALISA <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76016	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		9 Employer (See Instructions) TARRANT COUNTY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ALISA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ELECTED OFFICIAL		Employer (See Instructions) TARRANT COUNTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, DIANA <hr/> Contributor address; City; State; Zip Code HOUSTON TX, TX 77095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, MARCIA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, MARCIA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3781/4629 Rpt: 3784/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, RANDALL <hr/> 6 Contributor address; City; State; Zip Code MISSION VIEJO, CA 92691	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, RITA <hr/> Contributor address; City; State; Zip Code STEILACOOM, WA 98388	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, SHARON <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SHARON SIMMONS
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMS, HOWARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752-2832	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMS, HOWARD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752-2832	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3782/4629 Rpt: 3785/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMS, HOWARD <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78752-2832	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMS, MD, MPH, FACP, VICTOR <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584-7214	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) KELSEY-SEYBOLD CLINIC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMS, RICHARD <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMS, RICHARD <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, AUDREY <hr/> Contributor address; City; State; Zip Code LAURELTON, NY 11413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3783/4629 Rpt: 3786/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, CLIFFORD <hr/> 6 Contributor address; City; State; Zip Code ENGLEWOOD, NJ 07631	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, CLIFFORD <hr/> Contributor address; City; State; Zip Code ENGLEWOOD, NJ 07631	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, CLIFFORD <hr/> Contributor address; City; State; Zip Code ENGLEWOOD, NJ 07631	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, DANIEL <hr/> Contributor address; City; State; Zip Code VIOLA, KS 67149	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, DEBBIE <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3784/4629 Rpt: 3787/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code HILLSBORO, OR 97124	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, MICHAEL <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124-4054	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, MICHAEL <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, MICHAEL <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, MICHAEL <hr/> Contributor address; City; State; Zip Code AGOURA HILLS, CA 91301	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRODUCER/DIRECTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3785/4629 Rpt: 3788/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, PEGGY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77004		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMON, PEGGY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77004		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMONSEN, CHRISTIAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114		
Principal occupation / Job title (See Instructions) SITE SUPERVISOR		Employer (See Instructions) CANON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, BONNIE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code FRESNO, CA 93730		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, CYNTHIA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code PORTLAND, OR 97206		
Principal occupation / Job title (See Instructions) HR DIRECTOR		Employer (See Instructions) NORTHWEST CHILDRENS THEATER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3786/4629 Rpt: 3789/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, DON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, LAWRENCE <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) UHU TECHNOLOGIES LLC
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, LAWRENCE <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) UHU TECHNOLOGIES LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, MALCOLM <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, VICKIE <hr/> Contributor address; City; State; Zip Code SALEM, OR 97302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3787/4629 Rpt: 3790/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DELAINA <hr/> 6 Contributor address; City; State; Zip Code WILLS POINT, TX 75169	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DELAINA <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, DELAINA <hr/> Contributor address; City; State; Zip Code WILLS POINT, TX 75169	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, ELIJAH <hr/> Contributor address; City; State; Zip Code CROSBY, TX 77532	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) DATAVOX
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, KIMBERLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) HMMH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3788/4629 Rpt: 3791/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, LAURA <hr/> 6 Contributor address; City; State; Zip Code JOSHUA, TX 76058	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, LAURA <hr/> Contributor address; City; State; Zip Code JOSHUA, TX 76058	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, LINA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) LICENSED VETERINARY TECHNICIAN		Employer (See Instructions) BANFIELD PET HOSPITAL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, RANDALL <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) UT DALLAS
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, RANDALL <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) UT DALLAS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3789/4629 Rpt: 3792/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, RHONDA <hr/> 6 Contributor address; City; State; Zip Code SEABROOK, TX 77586-1952	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) IT SPECIALIST		9 Employer (See Instructions) VA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, RON <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, RONALD <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, RONALD <hr/> Contributor address; City; State; Zip Code GRAHAM, TX 76450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMS, THEODORE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77087	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DEVELOPER		Employer (See Instructions) GADBROOK INTERESTS LLC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3790/4629 Rpt: 3793/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, ALAN <hr/> 6 Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, ALAN <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, CAROLINE <hr/> Contributor address; City; State; Zip Code DEL VALLE, TX 78617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, CAROLINE <hr/> Contributor address; City; State; Zip Code DEL VALLE, TX 78617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, CAROLINE <hr/> Contributor address; City; State; Zip Code DEL VALLE, TX 78617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3791/4629 Rpt: 3794/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, CAROLINE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DEL VALLE, TX 78617		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, MIRYAM	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HURLEY, NY 12443		
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, ROSE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINCLAIR, ROSE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINDLER, SUSAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MCHENRY, IL 60051		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3792/4629 Rpt: 3795/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINDLER, SUSAN <hr/> 6 Contributor address; City; State; Zip Code MCHENRY, IL 60051	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINDLER, SUSAN <hr/> Contributor address; City; State; Zip Code MCHENRY, IL 60051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINDLER, SUSAN <hr/> Contributor address; City; State; Zip Code MCHENRY, IL 60051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, ARATI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT		Employer (See Instructions) RAISE ACHIEVEMENT, LLC
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, ARATI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) EDUCATIONAL CONSULTANT		Employer (See Instructions) RAISE ACHIEVEMENT, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3793/4629 Rpt: 3796/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, BRENDON <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77091	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PARTNER		9 Employer (See Instructions) TRAN SINGH LLP
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, MANPREET <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, MANPREET MONICA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FANAFF, HOAGLAND GONZALEZ AND BALDWIN
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, MANPREET MONICA <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FANAFF, HOAGLAND GONZALEZ AND BALDWIN
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, POMILA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UTMB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3794/4629 Rpt: 3797/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, POMILA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, POMILA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UTMB
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, POMILA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, PRITI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ASSOCIATED TESTING LABORATORIES, INC.
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, PRITI <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) ASSOCIATED TESTING LABORATORIES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3795/4629 Rpt: 3798/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGH, PRITI	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) ASSOCIATED TESTING LABORATORIES, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGHAL, DINESH	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code HOUSTON, TX 77056		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SINGHAL LAW FIRM
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGLETON, JEFF	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77390		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) AEABA LLC
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGLETON, JEFF	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77390		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) AEABA LLC
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGLETON, SCOTT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77025		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3796/4629 Rpt: 3799/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGLETON, SCOTT	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77025		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGSON, EUGENIO	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code RONKONKOMA, NY 11779		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259		
Principal occupation / Job title (See Instructions) RETIRED / VOLUNTEER		Employer (See Instructions) NOT APPLICABLE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259		
Principal occupation / Job title (See Instructions) RETIRED / VOLUNTEER		Employer (See Instructions) NOT APPLICABLE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259		
Principal occupation / Job title (See Instructions) RETIRED / VOLUNTEER		Employer (See Instructions) NOT APPLICABLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3797/4629 Rpt: 3800/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED / VOLUNTEER		9 Employer (See Instructions) NOT APPLICABLE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78259	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED / VOLUNTEER		Employer (See Instructions) NOT APPLICABLE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED INFORMATION TECHNOLOGY PROFESSIONAL		Employer (See Instructions) NOT APPLICABLE AS RETIRED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED INFORMATION TECHNOLOGY PROFESSIONAL		Employer (See Instructions) NOT APPLICABLE AS RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3798/4629 Rpt: 3801/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED INFORMATION TECHNOLOGY PROFESSIONAL		Employer (See Instructions) NOT APPLICABLE AS RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED INFORMATION TECHNOLOGY PROFESSIONAL		Employer (See Instructions) NOT APPLICABLE AS RETIRED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINHA, SHEKHAR <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3799/4629 Rpt: 3802/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIPES, BEATRICE ANNE <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77433	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIPES, BEATRICE ANNE <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIRACUSA, LULY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIRACUSA, LULY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78411	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIRCAR, GAUTAM <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) JACK HENRY & ASSOCIATES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3800/4629 Rpt: 3803/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SISCO, GARRY <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76502-4234	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TAX PREP		9 Employer (See Instructions) HR BLOCK
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SISCO, GARRY <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TAX PREPARATION		Employer (See Instructions) HRBLOCK
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SISCO, GARRY <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TAX PREPARATION		Employer (See Instructions) HRBLOCK
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SISCO, PATTY <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SISSINE, FRED <hr/> Contributor address; City; State; Zip Code OXNARD, CA 93036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3801/4629 Rpt: 3804/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIVRET, LESIE-ANNE <hr/> 6 Contributor address; City; State; Zip Code NO, WA 98166	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MESSAGE THERAPIST/CCRANIO-SACREAL THERAPIST		9 Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIVRET, LESIE-ANNE <hr/> Contributor address; City; State; Zip Code NO, WA 98166	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST/CCRANIO-SACREAL THERAPIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SJOQUIST, GINNY <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30306	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKEEN, SHELLY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKELTON, CHERYL <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75077	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) TACO BUENO CORP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3802/4629 Rpt: 3805/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKELTON, CHERYL <hr/> 6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75077	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) ACCOUNTING		9 Employer (See Instructions) TACO BUENO CORP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKIGEN, PATRICIA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60602	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKIGEN, PATRICIA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60602	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKIGEN, PATRICIA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINNER, JOSE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3803/4629 Rpt: 3806/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINNER, JOSE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINNER, JOSE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKIRVIN, WELDON J	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SEATTLE, WA 98119-5806		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKLOWER, KEITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL CERRITO, CA 94530		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKLOWER, KEITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL CERRITO, CA 94530		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3804/4629 Rpt: 3807/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKRUCH, BRIAN <hr/> 6 Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) SALES ENGINEER		9 Employer (See Instructions) SAMSARA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLABAUGH, DON <hr/> Contributor address; City; State; Zip Code OKEMOS, MI 48864-2076	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) INVESTMENT ADVISOR		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLADE, GRANT <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLADE, GRANT <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAGLE, CHRISTY <hr/> Contributor address; City; State; Zip Code KEMPNER, TX 76539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3805/4629 Rpt: 3808/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAGLE, DIANE <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAGLE, DIANE <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAGLE, MARTHA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAGLE, MARTHA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAMEN, SARAH <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3806/4629 Rpt: 3809/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAMEN, SARAH <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75234	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATER, NICK <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94608	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAVIK, ALINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) RICE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAVIN, VIRGINIA <hr/> Contributor address; City; State; Zip Code HASLET, TX 76052	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) PERATON
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAYTON, SAVANNAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) MANAGEMENT ANALYST		Employer (See Instructions) HHSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3807/4629 Rpt: 3810/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEE, PAUL <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11238	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) LOOSE CANNON		9 Employer (See Instructions) INTAR
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEUTEL, MARTHA <hr/> Contributor address; City; State; Zip Code HALTOM CITY, TX 76117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) THR
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEUTEL, MARTHA <hr/> Contributor address; City; State; Zip Code HALTOM CITY, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) THR
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEUTEL, MARTHA <hr/> Contributor address; City; State; Zip Code HALTOM CITY, TX 76117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) THR
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEUTEL, MARTHA <hr/> Contributor address; City; State; Zip Code HALTOM CITY, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) THR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3808/4629 Rpt: 3811/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLEUTEL, MARTHA <hr/> 6 Contributor address; City; State; Zip Code HALTOM CITY, TX 76117	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) THR
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLIWINSKI, KATELYN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76179	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) HOTEL
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, ANIA <hr/> Contributor address; City; State; Zip Code SEFFNER, FL 33584	Amount of Contribution (\$) \$4.70
Principal occupation / Job title (See Instructions) SALES AGENT		Employer (See Instructions) AIRLINES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, ANIA <hr/> Contributor address; City; State; Zip Code SEFFNER, FL 33584	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) SALES AGENT		Employer (See Instructions) AIRLINES
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, DAVID <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FREESE AND NICHOLS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3809/4629 Rpt: 3812/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, DAVID <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) FREESE AND NICHOLS, INC.
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, GLENNA <hr/> Contributor address; City; State; Zip Code SHENANDOAH, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, GLENNA <hr/> Contributor address; City; State; Zip Code SHENANDOAH, TX 77381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, JANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) LEONARD SLOAN AND ASSOCIATES INC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, JANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) LEONARD SLOAN AND ASSOCIATES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3810/4629 Rpt: 3813/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOAN, SHARON <hr/> 6 Contributor address; City; State; Zip Code PIPE CREEK, TX 78063	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOTHOWER, THOMAS <hr/> Contributor address; City; State; Zip Code ROCHESTER, NY 14620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TOUR MANAGER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMALLWOOD, DEBORAH <hr/> Contributor address; City; State; Zip Code THE PLAINS, VA 20198	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AESTHETICS ACADEMY OF VIRGINIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMALLWOOD, PAMELA <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMART, PATRICIA <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79605	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3811/4629 Rpt: 3814/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMART, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code ABILENE, TX 79605	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMELKO, THOMAS <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080-1911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEADER		Employer (See Instructions) TO BE LIKE ME
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMELKO, THOMAS <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080-1911	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEADER		Employer (See Instructions) TO BE LIKE ME
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMILES, JOAN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90019	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMILEY-KALIFF, BRUCE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) KALIFF INSURANCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3812/4629 Rpt: 3815/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ADRI <hr/> 6 Contributor address; City; State; Zip Code FT WORTH, TX 76133	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER/FLOLIST		9 Employer (See Instructions) MOSS FLORAL
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ADRI <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER/FLOLIST		Employer (See Instructions) MOSS FLORAL
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ADRI <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER/FLOLIST		Employer (See Instructions) MOSS FLORAL
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALETA <hr/> Contributor address; City; State; Zip Code NEWBURY PARK, CA 91320	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALEXANDRA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH ADMINISTRATOR		Employer (See Instructions) TEXAS STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3813/4629 Rpt: 3816/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALEXANDRA <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) RESEARCH ADMINISTRATOR		9 Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALEXANDRA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH ADMINISTRATOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALEXANDRA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) RESEARCH ADMINISTRATOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALEXANDRA <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH ADMINISTRATOR		Employer (See Instructions) TEXAS STATE UNIVERSITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALICE <hr/> Contributor address; City; State; Zip Code WINDSOR HILLS, CA 90043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3814/4629 Rpt: 3817/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ALLISON	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75214		
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, AMY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GONZALES, LA 70737		
Principal occupation / Job title (See Instructions) ESL TEACHER		Employer (See Instructions) QKIDS
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, AMY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GONZALES, LA 70737		
Principal occupation / Job title (See Instructions) ESL TEACHER		Employer (See Instructions) QKIDS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ANITA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ANITA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3815/4629 Rpt: 3818/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ANITA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ANITA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ANNGAIL <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ANNGAIL <hr/> Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ASHLEY <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENTREPRENEUR		Employer (See Instructions) VETERANS FINAL TOUCH SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3816/4629 Rpt: 3819/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BARBARA <hr/> 6 Contributor address; City; State; Zip Code SHENANDOAH, TX 77381	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BARBARA <hr/> Contributor address; City; State; Zip Code SHENANDOAH, TX 77381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BARBARA <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78467	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BEVERLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BO & JOSIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77277	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3817/4629 Rpt: 3820/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRIAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77021	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) CONSTRUCTION MANAGER		9 Employer (See Instructions) BRIAN SMITH CONSTRUCTION INSPECTION, INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRIAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) JOINUNIFIED.US
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRIDGETTE <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS DFPS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRIDGETTE <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS DFPS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, BRUCE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3818/4629 Rpt: 3821/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CAROLE <hr/> 6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CASEY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76011-2109	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) NATIONAL COLLEGE REP		Employer (See Instructions) RMCAD
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CHARLES <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CHARLES <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CHERYL <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SR LEGAL & GRIEVANCE SPECIALISTS		Employer (See Instructions) THE ALLUANCE AFT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3819/4629 Rpt: 3822/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CHERYL <hr/> 6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CHERYL <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SR LEGAL & GRIEVANCE SPECIALISTS		Employer (See Instructions) THE ALLUANCE AFT
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CHUCK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) PEASE PARK CONSERVANCY
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, CLAYTON <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DARIAL <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3820/4629 Rpt: 3823/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DARROLD <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) ACC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) HOUSTON ORGANIZATION OF PUBLIC EMPLOYEES
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) HOUSTON ORGANIZATION OF PUBLIC EMPLOYEES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) HOUSTON ORGANIZATION OF PUBLIC EMPLOYEES
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$59.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) HOUSTON ORGANIZATION OF PUBLIC EMPLOYEES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3821/4629 Rpt: 3824/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVE <hr/> 6 Contributor address; City; State; Zip Code COLUMBIA, SC 29201	7 Amount of Contribution (\$) \$4.50
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) SENIOR EXPRESS USA
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVE <hr/> Contributor address; City; State; Zip Code COLUMBIA, SC 29201	Amount of Contribution (\$) \$4.50
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SENIOR EXPRESS USA
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) POLITICAL CONSULTANT		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID <hr/> Contributor address; City; State; Zip Code HUNT, TX 78024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3822/4629 Rpt: 3825/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77345	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REAL EATATE		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) UNION ORGANIZER		Employer (See Instructions) HOUSTON ORGANIZATION OF PUBLIC EMPLOYEES
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAWN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PETROLEUM ANALYST COORDINATOR		Employer (See Instructions) NETHERLAND, SEWELL & ASSOCIATES, INC.
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAWN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PETROLEUM ANALYST COORDINATOR		Employer (See Instructions) NETHERLAND, SEWELL & ASSOCIATES, INC.
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAWN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PETROLEUM ANALYST COORDINATOR		Employer (See Instructions) NETHERLAND, SEWELL & ASSOCIATES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3823/4629 Rpt: 3826/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAWN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PETROLEUM ANALYST COORDINATOR		9 Employer (See Instructions) NETHERLAND, SEWELL & ASSOCIATES, INC.
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DEANNA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DEANNA <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DEBRA <hr/> Contributor address; City; State; Zip Code LAGUNA NIGUEL, CA 92677	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DIANNE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3824/4629 Rpt: 3827/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DIANNE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code MCKINNEY, TX 75071		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DONALD H	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code MURFREESBORO, TN 37130		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ELWOOD	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EL LAGO, TX 77586		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3825/4629 Rpt: 3828/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ELWOOD <hr/> 6 Contributor address; City; State; Zip Code EL LAGO, TX 77586	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, HALLEY <hr/> Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46202	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) ADVERTISING		Employer (See Instructions) DIGITAS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, HALLEY <hr/> Contributor address; City; State; Zip Code INDIANAPOLIS, IN 46202	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) ADVERTISING		Employer (See Instructions) DIGITAS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, HELEN <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, HOLLY <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3826/4629 Rpt: 3829/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, HOLLY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BERKELEY, CA 94707		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JAMAAL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) HARRIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JAMIE	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DYKEMA GOSSETT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JAMIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) JEFFERSON COUNTY DISTRICT CLERK		Employer (See Instructions) JEFFERSON COUNTY
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JAMIE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) JEFFERSON COUNTY DISTRICT CLERK		Employer (See Instructions) JEFFERSON COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3827/4629 Rpt: 3830/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JAMIE <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77707	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) JEFFERSON COUNTY DISTRICT CLERK		9 Employer (See Instructions) JEFFERSON COUNTY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JANICE <hr/> Contributor address; City; State; Zip Code RIVERSIDE, CA 92506	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JASON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF JASON SMITH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JOSANNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77277	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) WWW UNITED, INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JOSEPH <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21217	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) STATE OF MARYLAND

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3828/4629 Rpt: 3831/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JR., J. ALFRED <hr/> 6 Contributor address; City; State; Zip Code SACRAMENTO, CA 95835	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) N/A
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JUDY L <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JUSTIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGNER		Employer (See Instructions) HOUSTON CHRONICLE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KAREN <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$84.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KAREN <hr/> Contributor address; City; State; Zip Code MANOR, TX 78653	Amount of Contribution (\$) \$84.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR SCOTT & WHITE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3829/4629 Rpt: 3832/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KAREN <hr/> 6 Contributor address; City; State; Zip Code MABANK, TX 75147	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KAREN <hr/> Contributor address; City; State; Zip Code MABANK, TX 75147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KAREN <hr/> Contributor address; City; State; Zip Code MABANK, TX 75147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KATHLEEN <hr/> Contributor address; City; State; Zip Code ONTARIO, CA 91761-3867	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KATHLEEN <hr/> Contributor address; City; State; Zip Code ONTARIO, CA 91761-3867	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3830/4629 Rpt: 3833/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KEISHA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77083	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHIEF DEPUTY		9 Employer (See Instructions) FORT BEND COUNTY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KENNETH <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94591-8228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KENNETH <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94591-8228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KEVIN <hr/> Contributor address; City; State; Zip Code VERONA, WI 53593	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEAM RESOURCES
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KEVIN <hr/> Contributor address; City; State; Zip Code VERONA, WI 53593	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) TEAM RESOURCES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3831/4629 Rpt: 3834/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY <hr/> 6 Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY <hr/> Contributor address; City; State; Zip Code FAIR OAKS, CA 95628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3832/4629 Rpt: 3835/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code FAIR OAKS, CA 95628		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FAIR OAKS, CA 95628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FAIR OAKS, CA 95628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code FAIR OAKS, CA 95628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FAIR OAKS, CA 95628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3833/4629 Rpt: 3836/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, KIMBERLY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code FAIR OAKS, CA 95628		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LIBBY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PONCA CITY, OK 74601		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LIBBY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PONCA CITY, OK 74601		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LUCILLE	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code NORWOOD, OH 45212		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MADONNA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CONROE, TX 77384		
Principal occupation / Job title (See Instructions) CORPORATE AFFAIRS		Employer (See Instructions) CHEVRON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3834/4629 Rpt: 3837/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARIE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARIE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARIE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MARY <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3835/4629 Rpt: 3838/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MEG <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MEGAN <hr/> Contributor address; City; State; Zip Code MIDVALE, UT 84047	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SYSTEM ADMINISTRATOR		Employer (See Instructions) ENERBANKUSA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MINDY <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98662	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, NATHAN <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COUNTY EMPLOYEE		Employer (See Instructions) TARRANT COUNTY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, NATHAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737-9305	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VIDEO PRODUCER		Employer (See Instructions) IBM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3836/4629 Rpt: 3839/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, NATHAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737-9305	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) VIDEO PRODUCER		9 Employer (See Instructions) IBM
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, NICOLE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, NICOLE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75069	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, OLLER <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, OLLER <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3837/4629 Rpt: 3840/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, OLLER <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75707	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, OLLER <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, OLLER <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, OLLER <hr/> Contributor address; City; State; Zip Code TYLER, TX 75707	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PATRICIA <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3838/4629 Rpt: 3841/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PATRICIA <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PATRICIA <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE SALES		Employer (See Instructions) SALIENT SYSTE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE SALES		Employer (See Instructions) SALIENT SYSTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3839/4629 Rpt: 3842/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL E <hr/> 6 Contributor address; City; State; Zip Code CHATTANOOGA, TN 37422	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL E <hr/> Contributor address; City; State; Zip Code CHATTANOOGA, TN 37412	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PEGGY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77046	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR COLLEGE OF MEDICINE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, RAEVYN <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NA
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, RAEVYN <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3840/4629 Rpt: 3843/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, REBECCA <hr/> 6 Contributor address; City; State; Zip Code CROZET, VA 22932	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SALES ASSISTANT		9 Employer (See Instructions) GREENWOOD HOMES
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, RICHARD <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78503	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PUBLISHING		Employer (See Instructions) SHARYLAND INTERNET PARTNERS, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ROBIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, ROBIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, SARAH <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3841/4629 Rpt: 3844/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STACEY	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78721		
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) AUSTIN ISD
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STACEY	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code AUSTIN, TX 78721		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) AUSTIN ISD
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STEPHANIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79413		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STEPHANIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code LUBBOCK, TX 79413		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STEPHEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code YORBA LINDA, CA 92886		
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) HATHAWAY DINWIDDIE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3842/4629 Rpt: 3845/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STEVE AND HELEN <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, STEVE AND HELEN <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, SUSAN <hr/> Contributor address; City; State; Zip Code LAKE PLACID, FL 33852	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, SUSAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED UNITED METHODIST PASTOR		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3843/4629 Rpt: 3846/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED UNITED METHODIST PASTOR		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED UNITED METHODIST PASTOR		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED UNITED METHODIST PASTOR		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3844/4629 Rpt: 3847/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, T. RANDALL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, TAMEKA <hr/> Contributor address; City; State; Zip Code DUNCANVILLE, TX 75116	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) SUB -TEACHER		Employer (See Instructions) DISD
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILL <hr/> Contributor address; City; State; Zip Code OCEAN SPRINGS, MS 39564	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CARDIOTHORACIC SURGEON		Employer (See Instructions) USAF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILL <hr/> Contributor address; City; State; Zip Code OCEAN SPRINGS, MS 39564	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CARDIOTHORACIC SURGEON		Employer (See Instructions) USAF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3845/4629 Rpt: 3848/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77008		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3846/4629 Rpt: 3849/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH BRANTON, ERICA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76112	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LAW ENFORCEMENT		9 Employer (See Instructions) US GOVERNMENT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH HILL YOU, DOLLY <hr/> Contributor address; City; State; Zip Code CLEVELAND HEIGHTS, OH 44112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH HILL YOU, DOLLY <hr/> Contributor address; City; State; Zip Code CLEVELAND HEIGHTS, OH 44112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH-BANKS, IDA N. <hr/> Contributor address; City; State; Zip Code WACO, TX 76708	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH-CAMPBELL, STEVEN <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3847/4629 Rpt: 3850/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH-CAMPBELL, STEVEN <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97202	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH-CONNELL, KATHRYN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH-CONNELL, KATHRYN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60626	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH-GATLIN, LINDA <hr/> Contributor address; City; State; Zip Code PPLAYA VISTAA, CA 90094	Amount of Contribution (\$) \$5,024.00
Principal occupation / Job title (See Instructions) ADMIN ASSISTANCE		Employer (See Instructions) 1ST AME CHURCH LA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOLANSKY, PATTI <hr/> Contributor address; City; State; Zip Code CLEARWATER, FL 33764	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3848/4629 Rpt: 3851/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOLARSKI, RONALD <hr/> 6 Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) REHAB COUNSELOR		9 Employer (See Instructions) BEACON REHAB
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOLARSKI, RONALD <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) REHAB COUNSELOR		Employer (See Instructions) BEACON REHAB
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOLEN, BRIDGET <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98663-2326	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOLLER, EVAN <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 91403	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGEMENT ANALYST		Employer (See Instructions) LA CITY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOOTS, ALEXANDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3849/4629 Rpt: 3852/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMOTHERS, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMTIH, CRAIG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMYRL, DAPHNE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BIRDVILLE ISD
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMYRL, DAPHNE <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BIRDVILLE ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMYTH, DENNIS <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20015	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) SELF-EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3850/4629 Rpt: 3853/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMYTH, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SOMERVILLE, MA 02144	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPKA, KATHRYN <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78403	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPP, COOPER <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NASA
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPP, COOPER <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NASA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPP, LEILANI <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SPIRIT HALLOWEEN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3851/4629 Rpt: 3854/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPP, LEILANI <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77581	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) SPIRIT HALLOWEEN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNEAD, DONA <hr/> Contributor address; City; State; Zip Code LAWRENCE, KS 66044	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNEDEN, K <hr/> Contributor address; City; State; Zip Code LOWELL, MI 49331	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNEED, KAYLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) FBC
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNEIDER, JOHN <hr/> Contributor address; City; State; Zip Code HARTSDALE, NY 10530	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3852/4629 Rpt: 3855/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNELSON, RICHARD AND MADONNA <hr/> 6 Contributor address; City; State; Zip Code BROKEN ARROW, OK 74011	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNELSON, RICHARD AND MADONNA <hr/> Contributor address; City; State; Zip Code BROKEN ARROW, OK 74011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNELSON, RICHARD AND MADONNA <hr/> Contributor address; City; State; Zip Code BROKEN ARROW, OK 74011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIDER, KENNETH <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97233	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SECURITY GUARD		Employer (See Instructions) DPI SECURITY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIPES, JOHN <hr/> Contributor address; City; State; Zip Code PELZER, SC 29669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3853/4629 Rpt: 3856/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIPES, JOHN <hr/> 6 Contributor address; City; State; Zip Code PELZER, SC 29669	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIPES, JOHN <hr/> Contributor address; City; State; Zip Code PELZER, SC 29669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIPES, KENNETH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANUFACTURER		Employer (See Instructions) NATIONAL TUBE PROCESSING
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIPES, KENNETH <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MANUFACTURER		Employer (See Instructions) NATIONAL TUBE PROCESSING
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNIVELY, JUDITH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HARRIS CTY TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3854/4629 Rpt: 3857/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNODDERLY, MAX <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOEN, GAYLE <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98682	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOEN, GAYLE <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98682	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOEN, GAYLE <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98682	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOEN, GAYLE <hr/> Contributor address; City; State; Zip Code VANCOUVER, WA 98682	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3855/4629 Rpt: 3858/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOEN, GAYLE <hr/> 6 Contributor address; City; State; Zip Code VANCOUVER, WA 98682	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOWDEN, PATRICIA <hr/> Contributor address; City; State; Zip Code JERSEY CITY, NJ 07302	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNOWDEN, PATRICIA <hr/> Contributor address; City; State; Zip Code JERSEY CITY, NJ 07302	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, ANN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, ANN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3856/4629 Rpt: 3859/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, BOB	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20002-6022		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, BOB	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20002-6022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, DOUGLAS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382		
Principal occupation / Job title (See Instructions) VOTER FILE MANAGER		Employer (See Instructions) NEW YORK DEMOCRATIC PARTY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, DOUGLAS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382		
Principal occupation / Job title (See Instructions) VOTER FILE MANAGER		Employer (See Instructions) NEW YORK DEMOCRATIC PARTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, LIANA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LAS VEGAS, NV 89135-7810		
Principal occupation / Job title (See Instructions) MARRIAGE AND FAMILY THERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3857/4629 Rpt: 3860/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75234	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) FREDDIE MAC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, MICHAEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) FREDDIE MAC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, NED <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) VA
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, NEIL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, NEIL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3858/4629 Rpt: 3861/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOBOL, ANNE <hr/> 6 Contributor address; City; State; Zip Code LINCOLN, MA 01773	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOBOL, JENNIFER <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOBOL, JENNIFER <hr/> Contributor address; City; State; Zip Code EL CERRITO, CA 94530	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOECHTING, CHARLES <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOECHTING, CHARLES <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3859/4629 Rpt: 3862/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOFFER, JANET <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90004	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOHL, MARTY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOHN, JOSH <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TUTOR		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOHNE, TINA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76040	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOKOL, MARTIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3860/4629 Rpt: 3863/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLANO, JOSEPH <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75075	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) INVESTMENT ADVISOR		9 Employer (See Instructions) FISHER INVESTMENTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLAZZO, ALYSSA <hr/> Contributor address; City; State; Zip Code FREEPORT, NY 11520	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CLERK TYPIST 1		Employer (See Instructions) NASSAU COMMUNITY COLLEGE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLBERG, MICHELE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, JOHN <hr/> Contributor address; City; State; Zip Code HACIENDA HEIGHTS, CA 91745	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, JUDITH <hr/> Contributor address; City; State; Zip Code LAKE FOREST, CA 92630-7600	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3861/4629 Rpt: 3864/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, MONICA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75232	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) METHODIST HEALTH SYSTEM
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, MONICA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) METHODIST HEALTH SYSTEM
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, RAUL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) R & J FINANCIAL SERVICES
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, RAUL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) R & J FINANCIAL SERVICES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, SELENA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TEXAS COMPTROLLER JUDICIARY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3862/4629 Rpt: 3865/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, STACY <hr/> 6 Contributor address; City; State; Zip Code MCALLEN, TX 78501	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		9 Employer (See Instructions) UTRGV
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIS, STACY <hr/> Contributor address; City; State; Zip Code MCALLEN, TX 78501	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COLLEGE INSTRUCTOR		Employer (See Instructions) UTRGV
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLITARIO, MARGARET <hr/> Contributor address; City; State; Zip Code LANSDALE, PA 19446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SEMI-RETIRED		Employer (See Instructions) INDEPENDENT CONTRACTOR FOR VARSITY TUTORS
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIZ, JESSE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLIZ, JOSE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3863/4629 Rpt: 3866/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLLID, RACHEL <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLLID, RACHEL <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76180	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLLNER, GERHARD <hr/> Contributor address; City; State; Zip Code LINCOLN, MA 01773	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLOMON, BRIN <hr/> Contributor address; City; State; Zip Code QUEENS, NY 11373	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) HAROLD GRINSPOON FOUNDATION
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLOMON, ELIOT <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3864/4629 Rpt: 3867/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLOMON, LUCY <hr/> 6 Contributor address; City; State; Zip Code WEST HILLS, CA 91307	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LMFT		9 Employer (See Instructions) LUCY SOLOMON
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLOMON ALBERT, EVELYN <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73130	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLTIS, GRACE <hr/> Contributor address; City; State; Zip Code EASTON, MD 21601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLTIS, GRACE <hr/> Contributor address; City; State; Zip Code EASTON, MD 21601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLTIS, GRACE <hr/> Contributor address; City; State; Zip Code EASTON, MD 21601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3865/4629 Rpt: 3868/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLZMAN, BAMBOO <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60615	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLZMAN, BAMBOO <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOMERVILLE, TAMMY <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28277	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions) ATRIUM HEALTH
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOMMERHAUSER, JAMES <hr/> Contributor address; City; State; Zip Code BREMERTON, WA 98311-8921	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOMMERHAUSER, JAMES <hr/> Contributor address; City; State; Zip Code BREMERTON, WA 98311-8921	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3866/4629 Rpt: 3869/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONDEERS, RICKI <hr/> 6 Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73112	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONENSHINE, KATHRYN <hr/> Contributor address; City; State; Zip Code SANTA FE, NM 87507	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONG, JIE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONGY, LISA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) TOLLEFSON BRADLEY MITCHELL & MELENDI
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONN, DONNA <hr/> Contributor address; City; State; Zip Code LAKEPORT, CA 95453	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3867/4629 Rpt: 3870/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONN, DONNA <hr/> 6 Contributor address; City; State; Zip Code LAKEPORT, CA 95453	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONN, DONNA <hr/> Contributor address; City; State; Zip Code LAKEPORT, CA 95453	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONSTEIN, FRANCES <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SONSTEIN, FRANCES <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOORA, KARTHIK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PROJECT DEVELOPER		Employer (See Instructions) PATTERN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3868/4629 Rpt: 3871/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOPH, ED <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76209	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOPHIA, JETT <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOPHIA, JETT <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOPRANOS, KATHERINE <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORDEN, NANCY <hr/> Contributor address; City; State; Zip Code KENSINGTON, MD 20895	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BIOLOGIST		Employer (See Instructions) NIH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3869/4629 Rpt: 3872/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77035	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3870/4629 Rpt: 3873/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORELLE, PAUL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3871/4629 Rpt: 3874/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORENSE, DONALD <hr/> 6 Contributor address; City; State; Zip Code SEQUIM, WA 98382	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORIA, VERONICA <hr/> Contributor address; City; State; Zip Code WESTON, FL 33327	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALE ASSOCIATE		Employer (See Instructions) JCREW
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOROLA-POHLMAN, LENORA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SOROLA CONSULTING SERVICES INC.
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOROLA-POHLMAN, LENORA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SOROLA CONSULTING SERVICES INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORRELL, ARAMINTA <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3872/4629 Rpt: 3875/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORRELS, RANDALL	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SORRELS LAW
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORRENTO, BETTE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAWRENCEVILLE, NJ 08648		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3873/4629 Rpt: 3876/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOSA, GUADALUPE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, GIGI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3874/4629 Rpt: 3877/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, LISA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79913	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PROF; ATTORNEY		9 Employer (See Instructions) UTEP; INDEP CONTRACTOR
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, LISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79913	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR, ATTORNEY		Employer (See Instructions) UTEP, 8TH COURT OF APPEALS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, LISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79913	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROF; ATTORNEY		Employer (See Instructions) UTEP; INDEP CONTRACTOR
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, LISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79913	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR, ATTORNEY		Employer (See Instructions) UTEP, 8TH COURT OF APPEALS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, PASCUAL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) UTSW

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3875/4629 Rpt: 3878/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO, PASCUAL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75227	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) UTSW
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOTO-GALINDO, MARIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED EDUCATOR		Employer (See Instructions) I AM RETIRED.
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUDER, PAMELA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) FWISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHERN, DAVID <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHERN, TOM <hr/> Contributor address; City; State; Zip Code SAN CLEMENTE, CA 92672	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) BOAT CAPTAIN		Employer (See Instructions) DOLPHIN SAFARI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3876/4629 Rpt: 3879/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUZA, RANDY	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code SARATOGA, CA 95070		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUZIS, ARIANA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11217		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWARD, MARK C.	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWDER, ROBERT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HEWITT, TX 76643		
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) DORIS MILLER VAMC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWELL, MONICA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) HIGHER EDUCATION PROGRAM DIRECTOR		Employer (See Instructions) SOUTH UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3877/4629 Rpt: 3880/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWELL, MONICA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) HIGHER EDUCATION PROGRAM DIRECTOR		9 Employer (See Instructions) SOUTH UNIVERSITY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWELL, MONICA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION PROGRAM DIRECTOR		Employer (See Instructions) SOUTH UNIVERSITY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOWELLS, JERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ENGR		Employer (See Instructions) SCE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3878/4629 Rpt: 3881/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-1311	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$20.83
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-1311	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3879/4629 Rpt: 3882/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPALDING, MARY KATHERINE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) MARY KATHERINE SPALDING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPANGHER, JEFFREY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code TOMS RIVER, NJ 08753		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPANGHER, JEFFREY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code TOMS RIVER, NJ 08753		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPANJIAN, LAURA	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) GLOBAL POLICY DIRECTOR		Employer (See Instructions) AIRBNB
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPANJIAN, LAURA	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77005		
Principal occupation / Job title (See Instructions) GLOBAL POLICY DIRECTOR		Employer (See Instructions) AIRBNB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3880/4629 Rpt: 3883/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPANN, DOROTHY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPANN, DOROTHY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPARKEVICIUS, ANDREA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LAS CRUCES, NM 88011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPASSIS, MIRKA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, VA 22204		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DOS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPASSIS, MIRKA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ARLINGTON, VA 22204		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DOS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3881/4629 Rpt: 3884/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPATER-ZIMMERMAN, SUSAN <hr/> 6 Contributor address; City; State; Zip Code LARCHMONT, NY 10538	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAULDING, DORIS <hr/> Contributor address; City; State; Zip Code SAGINAW, MI 48638	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEARS, JESSE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) RETRO STUDIOS
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, ALICE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3882/4629 Rpt: 3885/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> 6 Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3883/4629 Rpt: 3886/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> 6 Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECHT, GLADYS <hr/> Contributor address; City; State; Zip Code MAINEVILLE, OH 45039	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECK, ANGELA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASTROPHYSICIST/PROFESSOR		Employer (See Instructions) UTSA
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPECK, ANGELA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASTROPHYSICIST/PROFESSOR		Employer (See Instructions) UTSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3884/4629 Rpt: 3887/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEEDLIN GONZALEZ, ROSIE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) BEXAR COUNTY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEICH-DAVIS, CARRIE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEICH-DAVIS, CARRIE <hr/> Contributor address; City; State; Zip Code KERRVILLE, TX 78028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPEIER, PENELOPE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$130.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, DEBORAH <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3885/4629 Rpt: 3888/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76018	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) HUMANA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) HUMANA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) ALBERTSONS GROCERY PHARMACY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) ALBERTSONS GROCERY PHARMACY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3886/4629 Rpt: 3889/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		9 Employer (See Instructions) ALBERTSONS GROCERY PHARMACY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECH		Employer (See Instructions) ALBERTSONS GROCERY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) HUMANA
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) HUMANA
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) ALBERTSONS GROCERY PHARMACY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3887/4629 Rpt: 3890/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		9 Employer (See Instructions) HUMANA
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) ALBERTSONS GROCERY PHARMACY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) ALBERTSONS GROCERY PHARMACY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECHNICIAN		Employer (See Instructions) HUMANA
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELL, SUE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131-2015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CERTIFIED PHARMACY TECH		Employer (See Instructions) ALBERTSONS GROCERY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3888/4629 Rpt: 3891/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPELT, DR. PHILIP <hr/> 6 Contributor address; City; State; Zip Code KNOXVILLE, TN 37931	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCE, JOAN <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77338	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, ASHLEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005-1058	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAWFIRM
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, BARBARA <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, BARBARA <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3889/4629 Rpt: 3892/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, BARBARA <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE COORDINATOR		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78244	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3890/4629 Rpt: 3893/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, JOHN <hr/> 6 Contributor address; City; State; Zip Code LEES SUMMIT, MO 64081	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, MARIE <hr/> Contributor address; City; State; Zip Code SOMERSWORTH, NH 03878	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, SHARON <hr/> Contributor address; City; State; Zip Code CHAPEL HILL, NC 27516	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, WESLEY A <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20859	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, WESLEY A <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20859	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3891/4629 Rpt: 3894/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER-HUBER, MARY <hr/> 6 Contributor address; City; State; Zip Code CORINTH, TX 76210	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SCHOOL PSYCHOLOGIST		9 Employer (See Instructions) GCISD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER-HUBER, MARY <hr/> Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SCHOOL PSYCHOLOGIST		Employer (See Instructions) GCISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPERBER, DAMON <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR		Employer (See Instructions) AAU
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPERBER, DAMON <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSOCIATE DIRECTOR		Employer (See Instructions) AAU
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPERLING, FALLON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77090	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GRAPHIC DESIGN		Employer (See Instructions) KBI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3892/4629 Rpt: 3895/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPERR, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33406	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) LAND SURVEYING		9 Employer (See Instructions) PARAMOUNT ENGINEERING GROUP, INC
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPIEGEL, PHYLLIS <hr/> Contributor address; City; State; Zip Code WHITE PLAINS, NY 10605	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) PHYLLIS SPIEGEL
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPIELER, NORMAN <hr/> Contributor address; City; State; Zip Code WOODLAND HILLS, CA 91367	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) NMS PROPERTY SERVICES CORP.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPIKES, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPILMAN, JAMES <hr/> Contributor address; City; State; Zip Code RICHMOND, CA 94804	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3893/4629 Rpt: 3896/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINELL, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINELL, MICHELLE <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216-1625	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216-1625	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216-1625	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3894/4629 Rpt: 3897/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216-1625	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3895/4629 Rpt: 3898/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINKS, MARTHA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPINOLA, LOURDES <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75212	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) AZTECA OMEGA GROUP
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPITZ, ANNE <hr/> Contributor address; City; State; Zip Code ROSLINDALE, MA 02131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BOSTON PUBLIC SCHOOLS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPITZBERG, MARIAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3896/4629 Rpt: 3899/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPODDECK, HEIKO <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97206	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) INSTRUCTOR		9 Employer (See Instructions) PORTLAND COMMUNITY COLLEGE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPONBERG, EDWARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPONBERG, DAVID <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) EDUCATIONAL DIAGNOSTICIAN		Employer (See Instructions) NORTHSIDE ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPORE, DONALD <hr/> Contributor address; City; State; Zip Code WAVERLY, IA 50677-2626	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPORE, DONALD <hr/> Contributor address; City; State; Zip Code WAVERLY, IA 50677-2626	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3897/4629 Rpt: 3900/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPORE, DONALD <hr/> 6 Contributor address; City; State; Zip Code WAVERLY, IA 50677-2626	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPOTO, PETER <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90032	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) WINE SOMMELIER		Employer (See Instructions) MISSION WINE & SPIRITS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPOTO, PETER <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WINE SOMMELIER		Employer (See Instructions) MISSION WINE & SPIRITS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRADLIN, LISA <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SYSTEMS ADMIN		Employer (See Instructions) FARM CREDIT BANK OF TEXAS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRADLIN, LISA <hr/> Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SYSTEMS ADMIN		Employer (See Instructions) FARM CREDIT BANK OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3898/4629 Rpt: 3901/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRAGUE, GLENNA <hr/> 6 Contributor address; City; State; Zip Code CHASSELL, MI 49916	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRAGUE, MICHAEL <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92105	Amount of Contribution (\$) \$33.32
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRANGEL, CHRISTOPHER <hr/> Contributor address; City; State; Zip Code SUDBURY, MA 01776	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRAYBERRY, SHARON <hr/> Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRENGER, CASSANDRA <hr/> Contributor address; City; State; Zip Code BOULDER CREEK, CA 95006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SARATOGA UNION SCHOOL DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3899/4629 Rpt: 3902/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINGER, GARY <hr/> 6 Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75244	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINGER, JIM <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MAINT TECH		Employer (See Instructions) JLL
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINGER, JIM <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MAINT TECH		Employer (See Instructions) JLL
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINGER, JUDY <hr/> Contributor address; City; State; Zip Code KRESS, TX 79052	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINKEL, ELIZABETH <hr/> Contributor address; City; State; Zip Code PLANO, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3900/4629 Rpt: 3903/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRINKEL, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75074	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPROWLS, DAVID <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPROWLS, DAVID <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPROWLS, DAVID <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97330	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPROWLS, DAVID <hr/> Contributor address; City; State; Zip Code CORVALLIS, OR 97330	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3901/4629 Rpt: 3904/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRUCE, SUSAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURLOCK, KIM <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SPURLOCK & ASSOCIATES, P.C.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURR, CHARLES <hr/> Contributor address; City; State; Zip Code WAKEFIELD, MA 01880	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER, RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURR, CHARLES <hr/> Contributor address; City; State; Zip Code WAKEFIELD, MA 01880	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER, RETIRED		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPURRIER, SHARON <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64118	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3902/4629 Rpt: 3905/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SREERAMA, KARUN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77059	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SREERAMA, KARUN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SREERAMA, KARUN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SRINIVASAN, PADMA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SRINIVASAN, PADMA <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3903/4629 Rpt: 3906/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SRIVASTAVA, SANDEEP <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75033	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SROLE, IRA <hr/> Contributor address; City; State; Zip Code ROCHESTER, NY 14607	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ST CLAIR, AMY <hr/> Contributor address; City; State; Zip Code HICO, TX 76457	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ST JOHN, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008-3813	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ST.JULES, LATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3904/4629 Rpt: 3907/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ST.JULES, LATRICIA	7 Amount of Contribution (\$) \$49.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77020		
8 Principal occupation / Job title (See Instructions) GOVERNMENT		9 Employer (See Instructions) HARRIS COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STACH, BARBARA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LEANDER, TX 78641		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STACK, CAROLINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code VENICE, CA 90291-5023		
Principal occupation / Job title (See Instructions) POST PRODUCER		Employer (See Instructions) HENRY HAYWOOD KING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STACK, CAROLINE	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code VENICE, CA 90291		
Principal occupation / Job title (See Instructions) POST PRODUCER		Employer (See Instructions) HENRY HAYWOOD KING
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STACY, REBECCA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MARIETTA, SC 29661		
Principal occupation / Job title (See Instructions) ECOMMERCE		Employer (See Instructions) STACY ENTERPRISES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3905/4629 Rpt: 3908/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STADING, TYCHA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAERKEL, ADAM <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LIEN PROCESSING MANAGER		Employer (See Instructions) ARCHER SYSTEMS
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, JOHN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, JOHN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, SUZANNE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3906/4629 Rpt: 3909/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3907/4629 Rpt: 3910/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE	7 Amount of Contribution (\$) \$9.00
6 Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3908/4629 Rpt: 3911/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> 6 Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, THEODORE <hr/> Contributor address; City; State; Zip Code PRESCOTT VALLEY, AZ 86315	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3909/4629 Rpt: 3912/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, WILLIAM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77024		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SCHWARTZ, PAGE & HARDING, LLP
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAFFORD, WILLIAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCHWARTZ, PAGE & HARDING, LLP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAHLER-MILLER, KIT	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PALMYRA, NJ 08065		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALDER, BARBARA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77089		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TEXAS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALDER, BARBARA	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code HOUSTON, TX 77089		
Principal occupation / Job title (See Instructions) JDGEU		Employer (See Instructions) TEXAA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3910/4629 Rpt: 3913/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALDER, BARBARA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77089	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) TEXAS
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALDER, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) JDGEU		Employer (See Instructions) TEXAA
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALDER, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTIN, TX 77089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TEXAS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALDER, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTIN, TX 77089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TEXAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALEY, STEPHANIE <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) ALLSTATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3911/4629 Rpt: 3914/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALEY, STEPHANIE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077		
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) ALLSTATE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALEY, STEPHANIE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077		
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) ALLSTATE
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALZER, KATHERINE	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code AUSTIN, TX 78750		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) INGENESIS
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STALZER, KATHERINE	Amount of Contribution (\$) \$7.50
Contributor address; City; State; Zip Code AUSTIN, TX 78750		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) INGENESIS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAMNES, KNUT	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code HOBOKEN, NJ 07030		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) STEVENS INSTITUTE OF TECHNOLOGY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3912/4629 Rpt: 3915/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAMNES, KNUT <hr/> 6 Contributor address; City; State; Zip Code HOBOKEN, NJ 07030	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) STEVENS INSTITUTE OF TECHNOLOGY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANAWAY, DAVID <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DISTINGUISHED ENGINEER		Employer (See Instructions) HILLTOP HOLDINGS
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANAWAY, DAVID <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DISTINGUISHED ENGINEER		Employer (See Instructions) HILLTOP HOLDINGS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDEFER, JOY <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDIFER, MARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3913/4629 Rpt: 3916/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDIFER, RICHARD <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) BUILDING CONTRACTOR		9 Employer (See Instructions) STANDIFER AND ASSOC., INC.
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANEK, STEVEN <hr/> Contributor address; City; State; Zip Code EAST MCKEESPORT, PA 15035	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANEK, STEVEN <hr/> Contributor address; City; State; Zip Code EAST MCKEESPORT, PA 15035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANER, DEANNA <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) DIRECTOR, CUSTOMER OPERATIONS & SUPPORT		Employer (See Instructions) BRIGHTSCREEN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD, MALCOLM <hr/> Contributor address; City; State; Zip Code FAIRVIEW PARK, OH 44126	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) US GOVERNMENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3914/4629 Rpt: 3917/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD, SUSAN <hr/> Contributor address; City; State; Zip Code GREEN VALLEY, AZ 85622	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANGL, RITA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANGL, RITA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANLEY, BROOKE <hr/> Contributor address; City; State; Zip Code ASTORIA, OR 97103	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) PROVIDENCE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3915/4629 Rpt: 3918/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANLEY, SHERYL <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) UNITED HEALTHCARE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANLEY, SHERYL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) UNITED HEALTHCARE
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANLEY, SHERYL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) UNITED HEALTHCARE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANSBURY, DENNIS <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703-0745	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANSBURY, KAREN CRAVER <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DENTAL		Employer (See Instructions) DENNIS E STANSBURY DDS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3916/4629 Rpt: 3919/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANSBURY, KAREN CRAVER <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) DENTAL		9 Employer (See Instructions) DENNIS E STANSBURY DDS
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANSFIELD, NANCY <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANTON, BOB <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) DANIEL ENERGY PARTNERS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANTON, EDITH <hr/> Contributor address; City; State; Zip Code BRADY, TN 76825	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPEN, ANITA <hr/> Contributor address; City; State; Zip Code PIEDMONT, CA 94611	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3917/4629 Rpt: 3920/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPEN, ANITA <hr/> 6 Contributor address; City; State; Zip Code PIEDMONT, CA 94611	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NONE		9 Employer (See Instructions) NONE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLETON, REV. CAROLYN L. <hr/> Contributor address; City; State; Zip Code WINDCREST, TX 78239	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARK, JOSEPH <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARK, JOSEPH <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARK, SHARON <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3918/4629 Rpt: 3921/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARK, SHARON	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code FRISCO, TX 75035		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARK, SHARON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRISCO, TX 75035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARK, SHARON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FRISCO, TX 75035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARKS, NIKKI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BELTON, TX 76513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARKS, NIKKI	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BELTON, TX 76513		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3919/4629 Rpt: 3922/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARKWEATHER, JAMES <hr/> 6 Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91411-3826	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAROPOLI, JOHN <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02199	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN-SCIENTIST		Employer (See Instructions) VERTEX PHARMACEUTICALS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAROPOLI, JOHN <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02199	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN-SCIENTIST		Employer (See Instructions) VERTEX PHARMACEUTICALS
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, CARL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, CARL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3920/4629 Rpt: 3923/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, CARL <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, CARL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, ELAINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) NATHAN K. GRIFFIN
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, ELAINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) NATHAN K. GRIFFIN
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, MADONNA K <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10022	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3921/4629 Rpt: 3924/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, MARK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code POINCIANA, FL 34759		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARR, MARK	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code POINCIANA, FL 34759		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STARTZELL, ANNA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PAPILLION, NE 68047		
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAUDT, KATHLEEN	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAUFFER, ALLYSON	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code LONGMONT, CO 80501		
Principal occupation / Job title (See Instructions) LYFT DRIVER		Employer (See Instructions) MYSELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3922/4629 Rpt: 3925/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAUFFER, ALLYSON <hr/> 6 Contributor address; City; State; Zip Code LONGMONT, CO 80501	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) LYFT DRIVER		9 Employer (See Instructions) MYSELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAVISH, PAUL <hr/> Contributor address; City; State; Zip Code HAVERTOWN, PA 19083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAVISH, PAUL <hr/> Contributor address; City; State; Zip Code HAVERTOWN, PA 19083	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAVISH, PAUL <hr/> Contributor address; City; State; Zip Code HAVERTOWN, PA 19083	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAVISH, PAUL <hr/> Contributor address; City; State; Zip Code HAVERTOWN, PA 19083	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3923/4629 Rpt: 3926/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAVISH, PAUL	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HAVERTOWN, PA 19083		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEARNS, HUGH	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) STEARNS DESIGN BUILD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEARNS, HUGH	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) STEARNS DESIGN BUILD
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEARNS, LINDA	Amount of Contribution (\$) \$103.95
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STECKER, MILLI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78733		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3924/4629 Rpt: 3927/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STECKLER, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEDMAN, KEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEDMAN, KEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEDMAN, KEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEEG, SUSAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3925/4629 Rpt: 3928/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, DEBORAH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code SPRING, TX 77381		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, DEBORAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPRING, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, DEBORAH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SPRING, TX 77381		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, ELIZABETH	Amount of Contribution (\$) \$30.50
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, LINDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3926/4629 Rpt: 3929/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELE, LINDA <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEELMAN, SARA <hr/> Contributor address; City; State; Zip Code INDIANA, PA 15701	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEENHOFF, LINDA <hr/> Contributor address; City; State; Zip Code CUTLER BAY, FL 33157	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEEPER, PAULA <hr/> Contributor address; City; State; Zip Code ARCADIA, CA 91006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEFANUCCI, JAMES <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90036	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3927/4629 Rpt: 3930/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEFANUCCI, JAMES <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90036	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEFFEN, BECKY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEFFEN, BECKY <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEFFEY, ASH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNITY CAT PROGRAM SUPERVISOR		Employer (See Instructions) AUSTIN HUMANE SOCIETY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEFFEY, ASH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNITY CAT PROGRAM SUPERVISOR		Employer (See Instructions) AUSTIN HUMANE SOCIETY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3928/4629 Rpt: 3931/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEHLIK, CHRIS <hr/> 6 Contributor address; City; State; Zip Code BERKELEY, CA 94703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DATA ANALYST		9 Employer (See Instructions) BERKELEY UNIFIED SCHOOL DISTRICT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEHLIK, CHRIS <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) BERKELEY UNIFIED SCHOOL DISTRICT
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, JERRY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) SELF EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, JERRY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76123	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT ANALYST		Employer (See Instructions) BOOZ ALLEN HAMILTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3929/4629 Rpt: 3932/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) IT ANALYST		9 Employer (See Instructions) BAKER HUGHES
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT ANALYST		Employer (See Instructions) BOOZ ALLEN HAMILTON
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, SALLY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90004	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, SALLY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90004	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, SALLY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3930/4629 Rpt: 3933/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEIN, SALLY <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90004	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINACKER, MARTHA <hr/> Contributor address; City; State; Zip Code TEMPE, AZ 85282	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) ARIZONA STATE UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBACH, DOUGLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRADUATE STUDENT RESEARCH ASSISTANT		Employer (See Instructions) RICE UNIVERSITY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBACH, DOUGLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GRADUATE STUDENT RESEARCH ASSISTANT		Employer (See Instructions) RICE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBECKER, RONALD <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3931/4629 Rpt: 3934/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBECKER, RONALD <hr/> 6 Contributor address; City; State; Zip Code SAINT LOUIS, MO 63116	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBECKER, RONALD <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBECKER, RONALD <hr/> Contributor address; City; State; Zip Code SAINT LOUIS, MO 63116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBERG, BRUCE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNER		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBERG, BRUCE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3932/4629 Rpt: 3935/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBERG, BRUCE <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10007	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) LIGHTING DESIGNER		9 Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBERG, BRUCE <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIGHTING DESIGNER		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBERG, LAWRENCE <hr/> Contributor address; City; State; Zip Code KEIZER, OR 97303	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) GOOGLE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBERG, MARC <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) BIGCOMMERCE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINBOMER, ROBERT <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3933/4629 Rpt: 3936/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINER, FRAN <hr/> 6 Contributor address; City; State; Zip Code LAUREL, MD 20709	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) UMD
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINER, JANICE <hr/> Contributor address; City; State; Zip Code ALBANY, OR 97321	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINSHNIDER, ROBIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) CITY OF DALLAS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINSHNIDER, ROBIN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) CITY OF DALLAS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINSNYDER, FAITH <hr/> Contributor address; City; State; Zip Code MILWAUKEE, WI 53209	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3934/4629 Rpt: 3937/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINSNYDER, FAITH	7 Amount of Contribution (\$) \$36.00
6 Contributor address; City; State; Zip Code MILWAUKEE, WI 53209		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINWEDELL, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) TRS OF TX
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEINWEDELL, PATRICIA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78746		
Principal occupation / Job title (See Instructions) FINANCE		Employer (See Instructions) TRS OF TX
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEITZ, SANDY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) COMPASS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEITZ, SANDY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) COMPASS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3935/4629 Rpt: 3938/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEITZ, SANDY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) COMPASS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STELLJES, LAURIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STELLJES, LAURIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STELLJES, LAURIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STELLJES, LAURIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3936/4629 Rpt: 3939/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEM, RANDALL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75220	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEM, RANDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEM, RANDALL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, JESSICA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, JESSICA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3937/4629 Rpt: 3940/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, JESSICA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, KELSEY <hr/> Contributor address; City; State; Zip Code JARRELL, TX 76537	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) HAIR STYLIST		Employer (See Instructions) JC PENNEY SALON
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, PAUL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, PAYL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEMPKO, PAYL <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3938/4629 Rpt: 3941/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENSLAND, JAMY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code NORTH BEND, WA 98045		
8 Principal occupation / Job title (See Instructions) COUNSELOR		9 Employer (See Instructions) DSHS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENSLAND, JAMY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NORTH BEND, WA 98045		
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) DSHS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPCZYK, MONA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MANHATTAN BEACH, CA 90266		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, DUSTIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791		
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) STEPHENS INV.LLC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, DUSTIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791		
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) STEPHENS INV.LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3939/4629 Rpt: 3942/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, JANIE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, JANIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, KATHRYN <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20002	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, KRISTIN <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75792	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) TYLER UNITY CENTER
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, KRISTIN <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75792	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMIN ASSISTANT		Employer (See Instructions) UT TYLER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3940/4629 Rpt: 3943/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, KRISTIN	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code WHITEHOUSE, TX 75792		
8 Principal occupation / Job title (See Instructions) OFFICE MANAGER		9 Employer (See Instructions) TYLER UNITY CENTER
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, KRISTIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75792		
Principal occupation / Job title (See Instructions) ADMIN ASSISTANT		Employer (See Instructions) UT TYLER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, LEONORA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75244-6928		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, LOUANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75287		
Principal occupation / Job title (See Instructions) ACTOR		Employer (See Instructions) MARY COLLINS AGENCY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, LOUANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75287		
Principal occupation / Job title (See Instructions) ACTOR		Employer (See Instructions) MARY COLLINS AGENCY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3941/4629 Rpt: 3944/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, LOUANNE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ACTOR		9 Employer (See Instructions) MARY COLLINS AGENCY
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, SARAH <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, SARAH <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, SARAH <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, SARAH <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3942/4629 Rpt: 3945/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENS, SARAH <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, BB <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33435	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, BB <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33435	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, CHERI <hr/> Contributor address; City; State; Zip Code MONKEY ISLAND, OK 74331	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON, NANCY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SENIOR MANAGER		Employer (See Instructions) JCPENNEY OPCO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3943/4629 Rpt: 3946/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEPHENSON-REDD, HILLARY <hr/> 6 Contributor address; City; State; Zip Code SLC, UT 84106	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) STAY AT HOME MOM		9 Employer (See Instructions) MY CHILDREN?
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERLING, DAVID <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) BANKER		Employer (See Instructions) EXTRACO BANKS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERLING, KAREN <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERLING, KAREN <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERLING, KAREN <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3944/4629 Rpt: 3947/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERLING, SUSAN <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERLING, WILLIAM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERN, CHUCK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERN, DAN <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20850	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) HOUSING ASSISTANCE COUNCIL
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERN, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3945/4629 Rpt: 3948/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STERNTHAL, BRIAN	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code EVANSTON, IL 60201		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVEN LOPEZ, STEVEN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, CHRISSY	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78610		
Principal occupation / Job title (See Instructions) YOUTH MINISTRY ASSOCIATE		Employer (See Instructions) WESTMINSTER PRESBYTERIAN CHURCH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, CHRISTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) AUTISM SPEAKS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, CHRISTA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) AUTISM SPEAKS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3946/4629 Rpt: 3949/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, CYNTHIA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, GAIL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRISCO, TX 75035		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) POWER-MARK
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, GAIL	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code FRISCO, TX 75035		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) POWER-MARK
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, JEANNETTE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DALLAS, TX 75222		
Principal occupation / Job title (See Instructions) CENTERS ADMINISTRATOR		Employer (See Instructions) DALLAS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, JOHN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CINNAMINSON, NJ 08077		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3947/4629 Rpt: 3950/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, KERRY <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, KERRY <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, KERRY <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, MELISSA <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, MELISSA <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3948/4629 Rpt: 3951/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, MELISSA <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92109	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, NIKE <hr/> Contributor address; City; State; Zip Code BOZEMAN, MT 59715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WILDLIFE BIOLOGIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, REBECCA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, VICTORIA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, VICTORIA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3949/4629 Rpt: 3952/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, CECILIA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76707	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SALES ADMIN		9 Employer (See Instructions) TIME MANUFACTURING
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, CELIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DESKTOP PUBLISHING		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, ELKE <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539-6399	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) HONEYWELL
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, ELKE <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539-6399	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) HONEYWELL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, GWEN <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70805	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3950/4629 Rpt: 3953/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, GWEN <hr/> 6 Contributor address; City; State; Zip Code BATON ROUGE, LA 70805	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, JOHN <hr/> Contributor address; City; State; Zip Code CATONSVILLE, MD 21228	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CARROLL COUNTY PUBLIC SCHOOLS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, ROBERT <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10075-1687	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENSON, ROBERT <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10075-1687	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVES, BUDDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3951/4629 Rpt: 3954/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVES, BUDDY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77030	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWARD, JILL <hr/> Contributor address; City; State; Zip Code LIBERTY HILL, TX 78642	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWARD, SHEILA <hr/> Contributor address; City; State; Zip Code POWDER SPRINGS, GA 30127	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWARD, SHEILA <hr/> Contributor address; City; State; Zip Code POWDER SPRINGS, GA 30127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWARD, SHEILA <hr/> Contributor address; City; State; Zip Code POWDER SPRINGS, GA 30127	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3952/4629 Rpt: 3955/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, ANDREW <hr/> 6 Contributor address; City; State; Zip Code PULLMAN, WA 99163	7 Amount of Contribution (\$) \$2.09
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, ANDREW <hr/> Contributor address; City; State; Zip Code PULLMAN, WA 99163	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, ANDREW <hr/> Contributor address; City; State; Zip Code PULLMAN, WA 99163	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, BARRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SOLE PROPRIETOR		Employer (See Instructions) BARRY STEWART
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, CARRIE <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3953/4629 Rpt: 3956/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, CARRIE <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, HOWARD <hr/> Contributor address; City; State; Zip Code PALM BEACH, FL 33480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED AUTO WORKER		Employer (See Instructions) GENERAL MOTORS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, HOWARD <hr/> Contributor address; City; State; Zip Code PALM BEACH, FL 33480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED AUTO WORKER		Employer (See Instructions) GENERAL MOTORS
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, HOWARD <hr/> Contributor address; City; State; Zip Code PALM BEACH, FL 33480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED AUTO WORKER		Employer (See Instructions) GENERAL MOTORS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, HOWARD <hr/> Contributor address; City; State; Zip Code PALM BEACH, FL 33480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3954/4629 Rpt: 3957/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, HOWARD <hr/> 6 Contributor address; City; State; Zip Code PALM BEACH, FL 33480	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, JAMES <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DELIVERY DRIVER		Employer (See Instructions) JASONS DELI
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, JAMES <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79907	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DELIVERY DRIVER		Employer (See Instructions) JASONS DELI
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, JEFFREY <hr/> Contributor address; City; State; Zip Code SAGINAW, TX 76179	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) LAW OFFICES OF ELIZABETH PARMER
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, JOHN <hr/> Contributor address; City; State; Zip Code YPSILANTI, MI 48198	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3955/4629 Rpt: 3958/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, LYNNE <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90046	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) ACTRESS		9 Employer (See Instructions) LYNNE STEWART
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, MARGURITE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) SAINT-GOBAIN ABRASIVES
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, MARGURITE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) SAINT-GOBAIN ABRASIVES
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, MARGURITE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) SAINT-GOBAIN ABRASIVES
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, MARGURITE <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CUSTOMER SERVICE		Employer (See Instructions) SAINT-GOBAIN ABRASIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3956/4629 Rpt: 3959/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, ROBERT	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, ROBERT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, ROBERT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NACOGDOCHES, TX 75965		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SABRINA	Amount of Contribution (\$) \$28.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249		
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) NISD
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SHAWN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75082		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PAYNE & BLANCHARD LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3957/4629 Rpt: 3960/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SHAWN <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75082	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) PAYNE & BLANCHARD LLP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AUSTIN ISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3958/4629 Rpt: 3961/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) AUSTIN ISD
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3959/4629 Rpt: 3962/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, SUSAN <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) AUSTIN ISD
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, WILEY <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART, WILLIAM A <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEWART-BEY, ROBIN <hr/> Contributor address; City; State; Zip Code RANDALLSTOWN, MD 21133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATIONAL SPECIALIST II		Employer (See Instructions) BALTIMORE CITY PUBLIC SCHOOLS
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STIGALL, SAM <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) UNIVERSITY OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3960/4629 Rpt: 3963/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STIGALL, SAM <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76010	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RESEARCH		9 Employer (See Instructions) UNIVERSITY OF TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STIGLIANI JR, DANIEL J <hr/> Contributor address; City; State; Zip Code HOPEWELL JUNCTION, NY 12533	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STIGLIANI JR, DANIEL J <hr/> Contributor address; City; State; Zip Code HOPEWELL JUNCTION, NY 12533	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STIGLIANI JR, DANIEL J <hr/> Contributor address; City; State; Zip Code HOPEWELL JUNCTION, NY 12533	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STILES, MARIANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3961/4629 Rpt: 3964/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STILES, MARIANNE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STILLMAN, DIANA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATABASE MAINTAINER		Employer (See Instructions) AMERICANA EXCHANGE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STILLMAN, DIANA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DATABASE MAINTAINER		Employer (See Instructions) AMERICANA EXCHANGE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STIMPSON, TY <hr/> Contributor address; City; State; Zip Code BENBROOK, TX 76126	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) VARGHESE SUMMERSETT
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STITELER, MARY <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3962/4629 Rpt: 3965/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STITELER, MARY <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STITTLEBURG, JASON <hr/> Contributor address; City; State; Zip Code PORTER, TX 77365	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) NOVETUS ENGINEERING LLC
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STITTLEBURG, JASON <hr/> Contributor address; City; State; Zip Code PORTER, TX 77365	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) NOVETUS ENGINEERING LLC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STITTLEBURG, JASON <hr/> Contributor address; City; State; Zip Code PORTER, TX 77365	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) NOVETUS ENGINEERING LLC
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOBART, PAMELA <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3963/4629 Rpt: 3966/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKE, LORI <hr/> 6 Contributor address; City; State; Zip Code SPARKS, NV 89434	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) HYATT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKE, LORI <hr/> Contributor address; City; State; Zip Code SPARKS, NV 89434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) HYATT
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKE, LORI <hr/> Contributor address; City; State; Zip Code SPARKS, NV 89434	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) HYATT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKE, LORI <hr/> Contributor address; City; State; Zip Code SPARKS, NV 89434	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) HYATT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKE, LORI <hr/> Contributor address; City; State; Zip Code SPARKS, NV 89434	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) HYATT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3964/4629 Rpt: 3967/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKMAN, CHRISTEN <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKMAN, CHRISTEN <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKMAN, GAIL <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75167	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKMAN, GAIL <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75167	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKMAN, LINDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3965/4629 Rpt: 3968/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKS, GREGORY <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) FONDREN ORTHOPEDIC GROUP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKSTILL, WADE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) ISS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOCKTON, WILLIAM <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RISK MANAGEMENT		Employer (See Instructions) MASTERCARD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STODDARD, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STODDARD, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3966/4629 Rpt: 3969/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STODDARD, MARK <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STODDARD, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STODDARD, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOFER, K <hr/> Contributor address; City; State; Zip Code GAINESVILLE, FL 32601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) UF
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOFER, K <hr/> Contributor address; City; State; Zip Code GAINESVILLE, FL 32601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FACULTY		Employer (See Instructions) UF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3967/4629 Rpt: 3970/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOIA, KARYL <hr/> 6 Contributor address; City; State; Zip Code LYNN, MA 01905	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) ASSEMBLY		9 Employer (See Instructions) GE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKDYK, LINDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKELY, ERNEST <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252-4929	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKER, TERESA N. <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) AUTHOR TEACHER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, BRENDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3968/4629 Rpt: 3971/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, EVELYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77069	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, JOHN <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COUNCILMEMBER		Employer (See Instructions) CITY OF BELLEVUE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, JOHN <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COUNCILMEMBER		Employer (See Instructions) CITY OF BELLEVUE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, JOHN <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COUNCILMEMBER		Employer (See Instructions) CITY OF BELLEVUE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, JOSEPHINE <hr/> Contributor address; City; State; Zip Code PINEHURST, NC 28374-7037	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3969/4629 Rpt: 3972/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, KAMILLA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) UT SYSTEM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, KAMILLA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78704		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) UT SYSTEM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, MARYANN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LIGHTHOUSE POINT, FL 33064		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOKES, SUSAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code FREDERICK, MD 21702		
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOLK, LAURA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75248		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3970/4629 Rpt: 3973/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOLL, MELISSA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOLLE, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOLLE, ELIZABETH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOLTZ, SUZANNE <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, APRIL <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3971/4629 Rpt: 3974/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, APRIL <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, BRIANA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE AGENCY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, BRIANA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE AGENCY
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, BRIANA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STATE AGENCY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KAMILLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGLISH PROFESSOR		Employer (See Instructions) ASHLAND UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3972/4629 Rpt: 3975/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KAMILLE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ENGLISH PROFESSOR		9 Employer (See Instructions) ASHLAND UNIVERSITY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KAREN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KAREN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KAREN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, KAREN <hr/> Contributor address; City; State; Zip Code FORT MILL, SC 29707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3973/4629 Rpt: 3976/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, LISA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33437		
8 Principal occupation / Job title (See Instructions) PERSONAL ASSISTANT		9 Employer (See Instructions) ASPAMIA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, LISA	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096-2107		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) BETH ISRAEL
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, MOLLY	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code AUSTIN, TX 78725		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) INTERTAPE POLYMER GROUP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, NANCY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77479		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE STONE LAW FIRM
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, PAT	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code WACO, TX 76708		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3974/4629 Rpt: 3977/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, REBECCA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code PLANO, TX 75024		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, RICHARD	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code TAYLOR, TX 76574-2569		
Principal occupation / Job title (See Instructions) PRINCIPAL CONSULTANT		Employer (See Instructions) RTS CONNECT LLC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE BELIC, ELLEN	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code CHICAGO, IL 60614		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONER, DOLORES	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOOKSBERRY, BARBARA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78749		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3975/4629 Rpt: 3978/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOOKSBERRY, BARBARA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOOL, ANNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOOL, ANNA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORBECK, ANAMAE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORBECK, ANAMAE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3976/4629 Rpt: 3979/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORBECK, ANAMAE <hr/> 6 Contributor address; City; State; Zip Code KYLE, TX 78640	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORCH, TODD <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$39.00
Principal occupation / Job title (See Instructions) CRO		Employer (See Instructions) CHIEF OUTSIDERS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOREY, DIANNA <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95865	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOREY, DIANNA <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95865	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOREY, REBECCA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77061	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3977/4629 Rpt: 3980/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORIE, TRACIE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORIE, TRACIE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORIE, WILLIAM <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORK-KNOCK, DEBORAH <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95829	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORK-KNOCK, DEBORAH <hr/> Contributor address; City; State; Zip Code SACRAMENTO, CA 95829	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3978/4629 Rpt: 3981/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, BARBARA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, BARBARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3979/4629 Rpt: 3982/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, DALE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, DALE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STORY, DIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$98.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOTEY, STEPHEN <hr/> Contributor address; City; State; Zip Code SALINAS, CA 93908	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOTLER, BARBARA <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3980/4629 Rpt: 3983/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOTLER, BARBARA <hr/> 6 Contributor address; City; State; Zip Code EULESS, TX 76039	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUGH, EMILY <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) JET PROPULSION LABORATORY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUGH, EMILY <hr/> Contributor address; City; State; Zip Code PASADENA, CA 91104	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) JET PROPULSION LABORATORY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, ARLEEN <hr/> Contributor address; City; State; Zip Code CONROE, TX 77301	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, DAVID <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		Employer (See Instructions) EL PASO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3981/4629 Rpt: 3984/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, DAVID	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code EL PASO, TX 79930		
8 Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		9 Employer (See Instructions) EL PASO COUNTY
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) COUNTY COMMISSIONER		Employer (See Instructions) EL PASO COUNTY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, RUSSELL EUGENE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BURIEN, WA 98166-2543		
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) THE HOME DEPOT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, RUSSELL EUGENE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BURIEN, WA 98166-2543		
Principal occupation / Job title (See Instructions) ASSOCIATE		Employer (See Instructions) THE HOME DEPOT
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, STEPHANIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3982/4629 Rpt: 3985/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, STEPHANIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOWENS, DANIEL <hr/> Contributor address; City; State; Zip Code KENNEWICK, WA 99336	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOWENS, DANIEL <hr/> Contributor address; City; State; Zip Code KENNEWICK, WA 99336	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOWENS, DANIEL <hr/> Contributor address; City; State; Zip Code KENNEWICK, WA 99336	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3983/4629 Rpt: 3986/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOWENS, DANIEL <hr/> 6 Contributor address; City; State; Zip Code KENNEWICK, WA 99336	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRADLEY, MARK <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) STRADLEY LAW FIRM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAKA, OLGA <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAND, ELIZABETH <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAND, LIZ <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) TX STATE UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3984/4629 Rpt: 3987/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAND, LIZ <hr/> 6 Contributor address; City; State; Zip Code BUDA, TX 78610	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SUPERVISOR		9 Employer (See Instructions) TX STATE UNIVERSITY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAND, LIZ <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) TX STATE UNIVERSITY
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAND, LIZ <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) TX STATE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAND PATTERSON, VALERIE <hr/> Contributor address; City; State; Zip Code PLYMOUTH, MN 55447	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) ST. PHILIP THE DEACON LUTHERAN CHURCH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRANG, PERIAN <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37205	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3985/4629 Rpt: 3988/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRANG, PERIAN <hr/> 6 Contributor address; City; State; Zip Code NASHVILLE, TN 37205	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRANGE, GARY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HVAC TECH		Employer (See Instructions) MILESTONE ELECTION
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRANGE, GARY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HVAC TECH		Employer (See Instructions) MILESTONE ELECTION
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRASSBERG, PETRA <hr/> Contributor address; City; State; Zip Code SULPHUR SPRINGS, TX 75482	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRATER, JEFFREY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ASSISTANT DIRECTOR INNOVATION SPECIAL PROGRAMS		Employer (See Instructions) ERNST & YOUNG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3986/4629 Rpt: 3989/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRATTEN, CHERYL	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code DENVER, CO 80211		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRATTEN, CHERYL	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code DENVER, CO 80211		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRATTON, ARLENE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code GREENVILLE, DE 19807-2033		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRATTON, BETTY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code ROCKFORD, IL 61109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUB, ELLEN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code COPLEY, OH 44321		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3987/4629 Rpt: 3990/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUS, IAN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUS, IAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) MARKET RESEARCH		Employer (See Instructions) VIA METROPOLITAN TRANSIT
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUS, IAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MARKET RESEARCH		Employer (See Instructions) VIA METROPOLITAN TRANSIT
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUS, IAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) MARKET RESEARCH		Employer (See Instructions) VIA METROPOLITAN TRANSIT
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUS, IAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) MARKET RESEARCH		Employer (See Instructions) VIA METROPOLITAN TRANSIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3988/4629 Rpt: 3991/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUSS, AARON <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20010	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		9 Employer (See Instructions) ANALYST INSTITUTE
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUSS, AARON <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) ANALYST INSTITUTE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUSS, ERIN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAUSS, ERIN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAW, WENDY <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60659	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3989/4629 Rpt: 3992/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAWN, RUSSEL <hr/> 6 Contributor address; City; State; Zip Code PRINCETON, TX 75407	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAWN, RUSSEL <hr/> Contributor address; City; State; Zip Code PRINCETON, TX 75407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRAWN, RUSSEL <hr/> Contributor address; City; State; Zip Code PRINCETON, TX 75407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRECK, MICHELLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRECK, MICHELLE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3990/4629 Rpt: 3993/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREET, AUSTIN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75229		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UT SOUTHWESTERN
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREET, AUSTIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UTSW
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREET, DIANE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code RICHARDSON, TX 75080		
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) STREET SMART PROPERTY SOLUTIONS, LLC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREET, HANSON	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) SETTLEMENT CONSULTANT		Employer (See Instructions) STREET SETTLEMENTS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREET, CHELSEA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3991/4629 Rpt: 3994/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREETER, RHODEN <hr/> 6 Contributor address; City; State; Zip Code LOUISVILLE, NY 40205-1816	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRIBLING, SHELLY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRIBLING, SHELLY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRIBLING, SHELLY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRIBLING, SHELLY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76904	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3992/4629 Rpt: 3995/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKHOUSER, SANDRA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77062		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, ALISA	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code DALLAS, TX 75218		
Principal occupation / Job title (See Instructions) ANALYSTS		Employer (See Instructions) GANNETT FLEMING
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, ANGIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75072-7223		
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, ANGIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75072-7223		
Principal occupation / Job title (See Instructions) ACCOUNTING		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, CAROL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77043		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) ACCENT EMPLOYER SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3993/4629 Rpt: 3996/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLER, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20009-2557	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRIJDONK, MELVINA <hr/> Contributor address; City; State; Zip Code ORO VALLEY, AZ 85737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGER, BRANDON <hr/> Contributor address; City; State; Zip Code CRANDALL, TX 75114	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PRODUCTION WORKER		Employer (See Instructions) RAYTHEON TECHNOLOGIES
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGER, BRANDON <hr/> Contributor address; City; State; Zip Code CRANDALL, TX 75114	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PRODUCTION WORKER		Employer (See Instructions) RAYTHEON TECHNOLOGIES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGER, DONNA <hr/> Contributor address; City; State; Zip Code CANANDAIGUA, NY 14424	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3994/4629 Rpt: 3997/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGER, DONNA	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code CANANDAIGUA, NY 14424		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGER, DONNA	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code CANANDAIGUA, NY 14424		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGER, HEWETTE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75205		
Principal occupation / Job title (See Instructions) PROSPECT RESEARCH ANALYST		Employer (See Instructions) UT SOUTHWESTERN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRINGFIELD, JUJU	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HARLINGEN, TX 78550		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROBL, SUSAN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SPRING, TX 77382		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3995/4629 Rpt: 3998/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMBERG, LINDA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75229	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) UNIVERSITY INSTRUCTOR		9 Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMBERG, LINDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) UNIVERSITY INSTRUCTOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMBERG, LINDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) UNIVERSITY INSTRUCTOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMBERG, LINDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) UNIVERSITY INSTRUCTOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMBERG, LINDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) UNIVERSITY INSTRUCTOR		Employer (See Instructions) UNIVERSITY OF NORTH TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3996/4629 Rpt: 3999/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMBERGER, CLAYTON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78745	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) UT AUSTIN
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROMSNESS, RUNE <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94607	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT MANAGER		Employer (See Instructions) UNIVERSITY OF CALIFORNIA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONG, MICHAEL <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONG, MICHAEL <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONG, MICHAEL <hr/> Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3997/4629 Rpt: 4000/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONG, MICHAEL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONG, MICHAEL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRONG, MICHAEL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROUSE, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KIRKLAND, WA 98033		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) W STROUSE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STROUSE, WILLIAM	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KIRKLAND, WA 98033		
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) W STROUSE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3998/4629 Rpt: 4001/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUCKMAN, HEATHER <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, WA 98223	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUMPFER, WARREN E <hr/> Contributor address; City; State; Zip Code BLACKWOOD, NJ 08012	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUTHERS, DARYL <hr/> Contributor address; City; State; Zip Code BELLINGHAM, WA 98229	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUVE, DAVID <hr/> Contributor address; City; State; Zip Code LOLETA, CA 95551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUWE, CHRISTIAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3999/4629 Rpt: 4002/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRYKER, SCOTT <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) EPIDEMIOLOGIST		9 Employer (See Instructions) AMGEN INC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUART, GUY <hr/> Contributor address; City; State; Zip Code BURNET, TX 78611	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUART, GUY <hr/> Contributor address; City; State; Zip Code BURNET, TX 78611	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUART, MARCIA <hr/> Contributor address; City; State; Zip Code FALLBROOK, CA 92028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUBEL, DIANE <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4000/4629 Rpt: 4003/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUBEL, DIANE <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUCKY, GALEN <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUCKY, GALEN <hr/> Contributor address; City; State; Zip Code SANTA BARBARA, CA 93117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STURM, LINDA <hr/> Contributor address; City; State; Zip Code TAMPA, FL 33625	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COURT REPORTER		Employer (See Instructions) SELF-EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STURTEVANT, JON M <hr/> Contributor address; City; State; Zip Code TUOLUMNE, CA 95379-9626	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4001/4629 Rpt: 4004/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STURTEVANT, JON M <hr/> 6 Contributor address; City; State; Zip Code TUOLUMNE, CA 95379-9626	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUTMAN-BONDY, LISA <hr/> Contributor address; City; State; Zip Code PORT WASHINGTON, NY 11050	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NORTHWELL HEALTH
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SU, JINGDONG <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) HITACHI
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SU, TING <hr/> Contributor address; City; State; Zip Code HILLSBOROUGH, CA 94010	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PATENT AGENT		Employer (See Instructions) PORTOLA PHARMACEUTICAL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SU, TING <hr/> Contributor address; City; State; Zip Code HILLSBOROUGH, CA 94010	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PATENT AGENT		Employer (See Instructions) PORTOLA PHARMACEUTICAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4002/4629 Rpt: 4005/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUAREZ, VICTORIA <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DALLAS ISD
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUAREZ, YESENIA <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77346	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OFFICE ADMINISTRATOR		Employer (See Instructions) NA
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUBLETT, CANDACE <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) TARRANT COUNTY DEMOCRATIC PARTY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUBRAMANYAM, GEETHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUBRAMANYAM, GEETHA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4003/4629 Rpt: 4006/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUCCIO, SUE <hr/> 6 Contributor address; City; State; Zip Code CHISHOLM, MN 55719	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUCHMANN, KATE <hr/> Contributor address; City; State; Zip Code SPRINGFIELD, VT 05156	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) VERMONT TECHNICAL COLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUCZEK, MARYBELLE <hr/> Contributor address; City; State; Zip Code SOUTH PADRE ISLAND, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUCZEK, MARYBELLE <hr/> Contributor address; City; State; Zip Code SOUTH PADRE ISLAND, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUCZEK, MARYBELLE <hr/> Contributor address; City; State; Zip Code SOUTH PADRE ISLAND, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4004/4629 Rpt: 4007/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUDDABY, BENJAMIN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78721		
8 Principal occupation / Job title (See Instructions) CALL CENTER		9 Employer (See Instructions) TRAVIS COUNTY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUDDABY, BENJAMIN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78721		
Principal occupation / Job title (See Instructions) CALL CENTER		Employer (See Instructions) TRAVIS COUNTY
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUDELA, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) TAX ACCOUNTANT		Employer (See Instructions) ALCATEL-LUCENT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUDELA, ROBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN MARCOS, TX 78666		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUFFNESS, DORIT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4005/4629 Rpt: 4008/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUFFNESS, DORIT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUFIAN, BEVERLY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) HOMEMKAER		Employer (See Instructions) NONE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUGENO, AMY <hr/> Contributor address; City; State; Zip Code ROUND MOUNTAIN, TX 78663	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) TRAVIS COUNTY SHERIFF'S OFFICE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUGGS, JACK <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUGGS, JACK <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4006/4629 Rpt: 4009/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUGGS, JACK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code DENISON, TX 75020		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUITS, STACY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78745		
Principal occupation / Job title (See Instructions) CONSTABLE		Employer (See Instructions) TRAVIS COUNTY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULAK, KAREN	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, ANN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) HEB
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, ANN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258		
Principal occupation / Job title (See Instructions) DATA SCIENTIST		Employer (See Instructions) HEB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4007/4629 Rpt: 4010/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, BRENT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) BUSINESS MANAGEMENT		9 Employer (See Instructions) VMWARE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, BRENT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) BUSINESS MANAGEMENT		Employer (See Instructions) VMWARE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, BRENT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) BUSINESS MANAGEMENT		Employer (See Instructions) VMWARE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, CHRIS <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NATIONAL SALES DIRECTOR		Employer (See Instructions) SIMPLIFILE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, GRAETEL <hr/> Contributor address; City; State; Zip Code RANCHO MIRAGE, CA 92270	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4008/4629 Rpt: 4011/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code PALMETTO BAY, FL 33157	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, JACQUELINE <hr/> Contributor address; City; State; Zip Code PALMETTO BAY, FL 33157	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, MARY ANN <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, MICHAEL <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BAYLOR
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, PATRICK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$27.00
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) CRESTMARC RESIDENTIAL, INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4009/4629 Rpt: 4012/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, PATRICK <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75024	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) CONTROLLER		9 Employer (See Instructions) CRESTMARC RESIDENTIAL, INC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULLIVAN, PATRICK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONTROLLER		Employer (See Instructions) CRESTMARC RESIDENTIAL, INC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULZBACKER, MARILYN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023-6538	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SULZBACKER, MARILYN <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10023-6538	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMA, BENJAMIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) WP ENGINE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4010/4629 Rpt: 4013/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMANTI, MARY J <hr/> 6 Contributor address; City; State; Zip Code LOMA LINDA, CA 92354	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CNA		9 Employer (See Instructions) MADISON GROVE POST ACUTE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMERS, HEATHER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GOOGLE TRAINER		Employer (See Instructions) SELF
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMERS, HEATHER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GOOGLE TRAINER		Employer (See Instructions) SELF
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMERS, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMERS, JIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4011/4629 Rpt: 4014/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMNER, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code WYNNEWOOD, PA 19006	7 Amount of Contribution (\$) \$1.75
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) MESSARI
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMNER, MATTHEW <hr/> Contributor address; City; State; Zip Code WYNNEWOOD, PA 19006	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) MESSARI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMNER, SABRINA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) JPS HEALTH NETWORK
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMRALL, PAUL <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) HCDB LLC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMRALL, PAUL <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) HCDB LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4012/4629 Rpt: 4015/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMRALL, PAUL <hr/> 6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) HOME BUILDER		9 Employer (See Instructions) HCDB LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMRALL, PAUL <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) HCDB LLC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMRALL, PAUL <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) HCDB LLC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMRALL, PAUL <hr/> Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) HCDB LLC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDBERG, TERRI <hr/> Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4013/4629 Rpt: 4016/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDE, NATALIE <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78015	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDE, NATALIE <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDERWALA, JAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NINYO & MOORE
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDERWALA, JAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NINYO & MOORE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDOCK, BARBARA <hr/> Contributor address; City; State; Zip Code NASHVILLE, TN 37221	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4014/4629 Rpt: 4017/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDOCK, BARBARA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code NASHVILLE, TN 37221		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNG, ANNE	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77063		
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SURATT, KATHRYN	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77059		
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) NASA
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SURBER, MARGY LYNN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEWPORT NEWS, VA 23606		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SURBER, MARGY LYNN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code NEWPORT NEWS, VA 23606		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4015/4629 Rpt: 4018/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SURBER, MARGY LYNN	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code NEWPORT NEWS, VA 23606		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUSAI, KEVIN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code SAN JOSE, CA 95135-1619		
Principal occupation / Job title (See Instructions) SOLUTIONS ENG		Employer (See Instructions) SINEQUA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTCH, JEFF	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SEATTLE, WA 98103		
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, ANNE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT COLLINS, CO 80526		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, ASHLEY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CARROLLTON, TX 75006		
Principal occupation / Job title (See Instructions) CHURCH STAFFER		Employer (See Instructions) UMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4016/4629 Rpt: 4019/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, SHELBY B <hr/> 6 Contributor address; City; State; Zip Code CHATTANOOGA, TN 37416	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ADMIN ASST		9 Employer (See Instructions) TVA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, SHELBY B <hr/> Contributor address; City; State; Zip Code CHATTANOOGA, TN 37416	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMIN ASST		Employer (See Instructions) TVA
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, SHELBY B <hr/> Contributor address; City; State; Zip Code CHATTANOOGA, TN 37416	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMIN ASST		Employer (See Instructions) TVA
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, SHELBY B <hr/> Contributor address; City; State; Zip Code CHATTANOOGA, TN 37416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMIN ASST		Employer (See Instructions) TVA
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, STEVE <hr/> Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) SSA LANDSCAPE ARCHITECTS, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4017/4629 Rpt: 4020/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTHERLAND, STEVE <hr/> 6 Contributor address; City; State; Zip Code SANTA CRUZ, CA 95060	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) SSA LANDSCAPE ARCHITECTS, INC.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTKA, ERIN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) KJMB SOLUTIONS
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTKA, ERIN <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) BUSINESS		Employer (See Instructions) KJMB SOLUTIONS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTKA, JEREMY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) KJMB SOLUTIONS, INC
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTKA, JEREMY <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) KJMB SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4018/4629 Rpt: 4021/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTKA, JEREMY <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) KJMB SOLUTIONS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTERFIELD, KRISTI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE DIRECTOR		Employer (See Instructions) GREATER SAN ANTONIO BUILDERS ASSOCIATION
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, ANDREA <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT HELP-DESK		Employer (See Instructions) HOOD COUNTY TX
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, ANDREA <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT HELP-DESK		Employer (See Instructions) HOOD COUNTY TX
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SCIENTIFIC EDITOR		Employer (See Instructions) MD ANDERSON CANCER CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4019/4629 Rpt: 4022/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, ANN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77054	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SCIENTIFIC EDITOR		9 Employer (See Instructions) MD ANDERSON CANCER CENTER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) HOUSTON MONTESSORI CENTER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, GEORGE <hr/> Contributor address; City; State; Zip Code NOGALES, AZ 85621	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUTTON, PAMELA <hr/> Contributor address; City; State; Zip Code PANAMA CITY, FL 32401	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) STONE & SUTTON, P.A.
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SVAT, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VIDEOGRAPHER		Employer (See Instructions) ACCELERATE LEARNING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4020/4629 Rpt: 4023/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SVAT, MICHAEL	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77018		
8 Principal occupation / Job title (See Instructions) VIDEOGRAPHER		9 Employer (See Instructions) ACCELERATE LEARNING
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAFFORD, EDNA	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) ACCOUNTING SPECIALIST		Employer (See Instructions) DANGEROUS ASSET MANAGEMENT
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAFFORD, EDNA	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) ACCOUNTING SPECIALIST		Employer (See Instructions) DANGEROUS ASSET MANAGEMENT
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAFFORD, EDNA	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) FINANCIAL CONTROLLER		Employer (See Instructions) THE CATCH-ALL
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAFFORD, EDNA	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) FINANCIAL CONTROLLER		Employer (See Instructions) THE CATCH-ALL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4021/4629 Rpt: 4024/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAN, ANNE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAN, BARBARA <hr/> Contributor address; City; State; Zip Code EAGAN, MN 55123	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAN, SANDY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CASE WORKER		Employer (See Instructions) IFM
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWAN, SANDY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) CASE WORKER		Employer (See Instructions) IFM
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANHOLM, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78724	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4022/4629 Rpt: 4025/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, HARRY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, HARRY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, HARRY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, KITTY <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97220	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4023/4629 Rpt: 4026/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, ROSEMARIE <hr/> 6 Contributor address; City; State; Zip Code BRYAN, TX 77801	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, ROSEMARIE <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, ARVID <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, ARVID <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, ARVID <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4024/4629 Rpt: 4027/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, MARY <hr/> 6 Contributor address; City; State; Zip Code BLANCO, TX 78606-0731	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, MARY <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606-0731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, MARY <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606-0731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARD, MARY <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606-0731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWART, JEAN <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ENGINEERING SCIENTIST		Employer (See Instructions) ARL: UT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4025/4629 Rpt: 4028/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWARTZ, MARIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) TEXAS MONTHLY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWED, JULIANNA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) HUTTO ISD
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEENEY, SANDY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEENEY, THERESE <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90405	Amount of Contribution (\$) \$33.32
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, CARL <hr/> Contributor address; City; State; Zip Code PERU, IN 46970	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4026/4629 Rpt: 4029/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, CARL <hr/> 6 Contributor address; City; State; Zip Code PERU, IN 46970	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, CARL <hr/> Contributor address; City; State; Zip Code PERU, IN 46970	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, CARL <hr/> Contributor address; City; State; Zip Code PERU, IN 46970	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, CARL <hr/> Contributor address; City; State; Zip Code PERU, IN 46970	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEET, MIKE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) GEOLOGIST		Employer (See Instructions) UT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4027/4629 Rpt: 4030/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEIGERT, ANITA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BOONSBORO, MD 21713		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWEIGERT, ANITA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BOONSBORO, MD 21713		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWENSON, ANDERS	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SPRINGVILLE, UT 84663		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) NOVVA DC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWENSON, DEB	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code BEND, OR 97702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWENSON, DEB	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BEND, OR 97702		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4028/4629 Rpt: 4031/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWENSON, KAREN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78723		
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWENSON, KAREN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78723		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIFT, LAUREL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MALLINCKRODT PHARMACEUTICALS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIFT, LAUREL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) MALLINCKRODT PHARMACEUTICALS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIG, CAROL M	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EAGLE, ID 83616		
Principal occupation / Job title (See Instructions) PARTNER		Employer (See Instructions) THE SWIG CO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4029/4629 Rpt: 4032/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWINNEY, JONATHAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) AMAZON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWISHER, ANNA <hr/> Contributor address; City; State; Zip Code JARRELL, TX 76537	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LACTATION CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWITZER, BRITTANY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWITZER, BRITTANY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWOBODA, JOSEPH <hr/> Contributor address; City; State; Zip Code LINCOLN, NE 68510	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) JOSEPH SWOBODA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4030/4629 Rpt: 4033/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, VA 23221	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23221	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23221	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23221	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23221	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4031/4629 Rpt: 4034/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD	7 Amount of Contribution (\$) \$37.00
6 Contributor address; City; State; Zip Code RICHMOND, VA 23221		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD	Amount of Contribution (\$) \$47.00
Contributor address; City; State; Zip Code RICHMOND, VA 23221		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD	Amount of Contribution (\$) \$59.00
Contributor address; City; State; Zip Code RICHMOND, VA 23221		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD	Amount of Contribution (\$) \$42.00
Contributor address; City; State; Zip Code RICHMOND, VA 23221		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code RICHMOND, VA 23221		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4032/4629 Rpt: 4035/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, VA 23221	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYERS, RICHARD <hr/> Contributor address; City; State; Zip Code RICHMOND, VA 23221	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWYKA, NICHOLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OIL AND GAS FINANCE		Employer (See Instructions) IMPERATIVE CHEMICAL PARTNERS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SY, STANLEY <hr/> Contributor address; City; State; Zip Code PHARR, TX 78577	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) SELG
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYED, HISHAM <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4033/4629 Rpt: 4036/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYED, HISHAM	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75230		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYED, HISHAM	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYED, HISHAM	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code DALLAS, TX 75230		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYKES, JACKY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) BAKER		Employer (See Instructions) DEZAVALA BAKERY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYKES, KAREN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FOLSOM, CA 95630		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4034/4629 Rpt: 4037/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYKES, KAREN <hr/> 6 Contributor address; City; State; Zip Code FOLSOM, CA 95630	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYMES, WILLIAM <hr/> Contributor address; City; State; Zip Code ORCAS, WA 98280	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYMMES, LOUISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYPTAK, ANN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYPTAK, ANN <hr/> Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4035/4629 Rpt: 4038/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYPTAK, ANN <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SYVERSON, GENE <hr/> Contributor address; City; State; Zip Code LIVONIA, MI 48154	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SZOSTKOWSKI, TED <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SMMA
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SZOSTKOWSKI, TED <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SMMA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SZOTT, LYNNE <hr/> Contributor address; City; State; Zip Code PORT SAINT LUCIE, FL 34952	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN CASE MANAGER		Employer (See Instructions) CSL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4036/4629 Rpt: 4039/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SZPAKOWSKI, SALLY <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666-1010	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SZUREK, KATE <hr/> Contributor address; City; State; Zip Code LA CONNER, WA 98257	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SKAGIT LAW GROUP, PLLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SZYSZKO, T <hr/> Contributor address; City; State; Zip Code LONDON, DC 20000	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) HOLIDAYMAKER		Employer (See Instructions) HOLIDAY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T, NATALIE <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78404	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXEC DIRECTOR		Employer (See Instructions) DEL MAR COLLEGE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T HOLLINGSHEAD, MICHAEL <hr/> Contributor address; City; State; Zip Code FLETCHER, NC 28732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ANESTHESIA TECHNICIAN		Employer (See Instructions) CGVAMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4037/4629 Rpt: 4040/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAAFFE, PETER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) TAAFFE & ASSOCIATES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABATABAIE, TARA <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73162	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SILL LAW GROUP
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABATABAIE, TARA <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73162	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SILL LAW GROUP
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABATABAIE, TARA <hr/> Contributor address; City; State; Zip Code OKLAHOMA CITY, OK 73162	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SILL LAW GROUP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABIBZADEGAN, SHAHRAM <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADA		Employer (See Instructions) NAVARRO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4038/4629 Rpt: 4041/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABIBZADEGAN, SHAHRAM <hr/> 6 Contributor address; City; State; Zip Code GALVESTON, TX 77550	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADA		9 Employer (See Instructions) NAVARRO COUNTY
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABIBZADEGAN, SHAHRAM <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550-6234	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADA		Employer (See Instructions) NAVARRO COUNTY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABIBZADEGAN, SHAHRAM <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADA		Employer (See Instructions) NAVARRO COUNTY
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABIBZADEGAN, SHAHRAM <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADA		Employer (See Instructions) NAVARRO COUNTY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABOR, CATHERINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TABOR LAW FIRM, PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4039/4629 Rpt: 4042/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABRIZI, SAURAH	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78703		
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions) SELF-EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TACKER, BOB	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code COMBINE, TX 75159		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TADDIKEN, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LUCAS, TX 75002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TADDIKEN, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LUCAS, TX 75002		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAFOYA, NICK	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code BRYAN, TX 77807		
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) MITCHELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4040/4629 Rpt: 4043/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAGGART, WALTER <hr/> 6 Contributor address; City; State; Zip Code VILLANOVA, PA 19085	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAGHDISI, ALI REZA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024-7020	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) RAMA CO
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAHIR, MUHAMMAD <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407-3272	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) ARAMCO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAHIR, ZAFAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$850.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAHIR, ZAFAR <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4041/4629 Rpt: 4044/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAI, JEANNE	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code CAMBRIDGE, MA 02140		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAI, JEANNE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code CAMBRIDGE, MA 02140		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAIT, LANE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAIT, LANE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAITE, BLONDENE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75072		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4042/4629 Rpt: 4045/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAITE, BLONDENE <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75072	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALAMANTEZ, PAUL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALAMANTEZ, PAUL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALBOTT, KARISHMA <hr/> Contributor address; City; State; Zip Code NOLANVILLE, TX 76559	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) DAYA EDUCATIONAL CONSULTING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALBOTT, LEANA <hr/> Contributor address; City; State; Zip Code WALL, TX 76957	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4043/4629 Rpt: 4046/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALDYKIN, MELISSA E <hr/> 6 Contributor address; City; State; Zip Code BELLAIRE, TX 77401-5605	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALDYKIN, MELISSA E <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401-5605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALLEVAST, WILLIAM <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80227	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALLEY, DEBORAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALLMAN, CURTIS <hr/> Contributor address; City; State; Zip Code LINDEN, NJ 07036	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4044/4629 Rpt: 4047/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALLMAN, JUDITH <hr/> 6 Contributor address; City; State; Zip Code NORTH HAMPTON, NH 03862	7 Amount of Contribution (\$) \$3.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TALMAGE, DAVID <hr/> Contributor address; City; State; Zip Code COVINGTON, LA 70433	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAM, ALFRED <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019-7607	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) ALIGHT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, CHRYSTAL <hr/> Contributor address; City; State; Zip Code SAN PEDRO, CA 90731	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) SERVICE REPRESENTATIVE		Employer (See Instructions) KAISER PERMANENTE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, ELISA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GOVERNMENT AFFAIRS		Employer (See Instructions) EL PASO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4045/4629 Rpt: 4048/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, ELISA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GOVERNMENT AFFAIRS		9 Employer (See Instructions) EL PASO COUNTY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, PAULINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) EL PASO COUNTY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, PAULINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) POLICY ADVISOR		Employer (See Instructions) EL PASO COUNTY
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, PAULINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) EL PASO COUNTY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, ROBERTO <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) TAMPER LOGISTICS, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4046/4629 Rpt: 4049/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMAYO, ROBERTO <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BUSINESS OWNER		9 Employer (See Instructions) TAMPER LOGISTICS, LLC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMBURELLO, ANITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMBURELLO, ANITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEEZ, MUSTAFA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) OUTREACH STRATEGISTS LLC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEEZ, MUSTAFA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) OUTREACH STRATEGISTS LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4047/4629 Rpt: 4050/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4048/4629 Rpt: 4051/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATION		9 Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMEZ, ADRIANA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) TEJANO CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4049/4629 Rpt: 4052/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANCIN, CHARLOTTE <hr/> 6 Contributor address; City; State; Zip Code TURTLE CREEK, PA 15145-1127	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) CARNEGIE MELLON UNIVERSITY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANE, NORA <hr/> Contributor address; City; State; Zip Code PITTSBURGH, PA 15217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANGRI, DINSHAW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANGRI, DINSHAW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANKARD, EDWARD <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77469	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4050/4629 Rpt: 4053/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANKARD, TED <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77469	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANNER, LOUIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANNER, LOUIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANNER, MORRIS <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANNER, MORRIS <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4051/4629 Rpt: 4054/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANSILL, ROY <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANSILL, ROY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$1.06
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANSILL, ROY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANSILL, ROY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$1.06
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TANYI, ANGIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219-2511	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4052/4629 Rpt: 4055/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAO, FENG <hr/> 6 Contributor address; City; State; Zip Code LAWRENCE, KS 66049	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAO, WEIQIONG <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75204	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) POLSINELLI
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAPLEY, MARTHA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAPONG, DEXTER <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SENIOR BUSINESS ANALYST		Employer (See Instructions) WINTRUST FINANCIAL
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TARAN, STEPHEN <hr/> Contributor address; City; State; Zip Code NOLENSVILLE, TN 37135	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4053/4629 Rpt: 4056/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TARSHIS, JOAN <hr/> 6 Contributor address; City; State; Zip Code CARROLLTON, GA 30116	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TASIAN, DIANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TASIAN, DIANE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATAK, PATRICIA <hr/> Contributor address; City; State; Zip Code NORTHBROOK, IL 60062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATE, ARTHUR <hr/> Contributor address; City; State; Zip Code CROSSVILLE, TN 38555	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4054/4629 Rpt: 4057/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATE, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97213	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) PROGRAM SPECIALIST		9 Employer (See Instructions) MULTNOMAH COUNTY
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATE, SHARON <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-3912	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATE, SHARON <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155-3912	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATMAN, TX <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, ED <hr/> Contributor address; City; State; Zip Code CLOVIS, NM 88101	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4055/4629 Rpt: 4058/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, ED	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code CLOVIS, NM 88101		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, ED	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CLOVIS, NM 88101		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, ED	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CLOVIS, NM 88101		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, LYNN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROBINSON, TX 76706		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BAYLOR UNIVERSITY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, LYNN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROBINSON, TX 76706		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BAYLOR UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4056/4629 Rpt: 4059/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, PAIGE <hr/> 6 Contributor address; City; State; Zip Code SLIDELL, LA 70461	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAU, JOCELYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) DISTRICT DIRECTOR		Employer (See Instructions) US HOUSE OF REPRESENTATIVES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUB, JUDITH <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUB, SARAH <hr/> Contributor address; City; State; Zip Code ARLINGTON, VA 22205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF-EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUBE, DEETTA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4057/4629 Rpt: 4060/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAUBER, HARVEY <hr/> 6 Contributor address; City; State; Zip Code ATLANTA, GA 30327	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAVAKKOL, PEGGY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		Employer (See Instructions) WELLNESS CARE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAWNEY, JAKOB <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC POLICY FELLOW		Employer (See Instructions) TEXAS AFT
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLO, BETH <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, AMY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DENTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4058/4629 Rpt: 4061/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, AMY <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DENTON ISD
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, AMY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DENTON ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ANTHONY <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) INDEX ANALYTICS
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ANTOINETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ANTOINETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4059/4629 Rpt: 4062/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BARBARA <hr/> 6 Contributor address; City; State; Zip Code KNOXVILLE, TN 37920	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BARRY <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33186	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TED B. LYON & ASSOCIATES, P.C.
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TED B. LYON & ASSOCIATES, P.C.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BETTY JEANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4060/4629 Rpt: 4063/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BLAIR	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75248		
8 Principal occupation / Job title (See Instructions) ACADEMIC ADVISOR		9 Employer (See Instructions) UT DALLAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, CAROL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code DALLAS, TX 75209		
Principal occupation / Job title (See Instructions) LAND & INVESTMENTS		Employer (See Instructions) J & C TAYLOR CORP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, CAROL	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75209		
Principal occupation / Job title (See Instructions) LAND & INVESTMENTS		Employer (See Instructions) J & C TAYLOR CORP
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, CAROL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, CAROL	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4061/4629 Rpt: 4064/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, DAVID <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DIVISION MANAGER		9 Employer (See Instructions) RED & WHITE GREENERY, INC.
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, DAVID <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIVISION MANAGER		Employer (See Instructions) RED & WHITE GREENERY, INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, DONNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, GRACE <hr/> Contributor address; City; State; Zip Code FRESNO, CA 93710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HEATHER <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75150	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4062/4629 Rpt: 4065/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HEATHER <hr/> 6 Contributor address; City; State; Zip Code MESQUITE, TX 75150	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HEIDI <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R.N. AND PROFESSOR		Employer (See Instructions) TEXAS WESLEYAN U.
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HEIDI <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) R.N. AND PROFESSOR		Employer (See Instructions) TEXAS WESLEYAN U.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HELEN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75086	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) S3
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY DA'S OFFICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4063/4629 Rpt: 4066/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HOLLY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78751	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TRAVIS COUNTY DAS OFFICE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY DAS OFFICE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, HOLLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TRAVIS COUNTY DAS OFFICE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JANICE M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JANICE M <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4064/4629 Rpt: 4067/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JAY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, JOHN <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20001	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) PRINCIPAL & FOUNDER		Employer (See Instructions) WHITE OAK ROAD LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4065/4629 Rpt: 4068/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, KIERA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) FUNDRAISER		9 Employer (See Instructions) STRONG STRATEGIES
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, KRISTA <hr/> Contributor address; City; State; Zip Code WICHITA FALLS, TX 76310	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, KRISTEN <hr/> Contributor address; City; State; Zip Code STUART, FL 34997	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4066/4629 Rpt: 4069/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4067/4629 Rpt: 4070/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75701	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LEIGH <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, MARLYNDA <hr/> Contributor address; City; State; Zip Code HUDSON OAKS, TX 76087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4068/4629 Rpt: 4071/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, MARLYNDA <hr/> 6 Contributor address; City; State; Zip Code HUDSON OAKS, TX 76087	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) NONE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4069/4629 Rpt: 4072/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> 6 Contributor address; City; State; Zip Code BEDFORD, TX 76021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, ROBERT <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, SHANNON <hr/> Contributor address; City; State; Zip Code ERIE, CO 80516	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SVVSD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, STEFANIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4070/4629 Rpt: 4073/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, STEVEN	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code ROANOKE, VA 24015		
8 Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		9 Employer (See Instructions) RADFORD UNIVERSITY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TARAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TARAH	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TARAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PEARLAND, TX 77584		
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) SOUTHWEST AIRLINES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TERRY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ARGYLE, TX 76226		
Principal occupation / Job title (See Instructions) INFRASTRUCTURE ARCHITECT		Employer (See Instructions) IBM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4071/4629 Rpt: 4074/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TERRY <hr/> 6 Contributor address; City; State; Zip Code ARGYLE, TX 76226	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) INFRASTRUCTURE ARCHITECT		9 Employer (See Instructions) IBM
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TIFFANI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TIMOTHY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) JACKSON WALKER LLP
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TOM <hr/> Contributor address; City; State; Zip Code DAL, TX 75243	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TOM <hr/> Contributor address; City; State; Zip Code DAL, TX 75243	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4072/4629 Rpt: 4075/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TOM <hr/> 6 Contributor address; City; State; Zip Code DAL, TX 75243	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TOM D <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243-6506	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TOM D <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243-6506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TOM D <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243-6506	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) TAYLOR CONSULTING & ENGINEERING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4073/4629 Rpt: 4076/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR-SCOTT, ADRIAN <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76210	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		9 Employer (See Instructions) SELF EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR-SCOTT, ADRIAN <hr/> Contributor address; City; State; Zip Code DENTON, TX 76210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYS, WILMA M TAYS <hr/> Contributor address; City; State; Zip Code PORTAGE, MI 49024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEAL, DENNIS <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHIROPRACTOR		Employer (See Instructions) SELF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEASTER, JOE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4074/4629 Rpt: 4077/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEASTER, JOE	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77059		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEBO, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LA MESA, CA 91941		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEBO, ROBERT	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code LA MESA, CA 91941		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEBO, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LA MESA, CA 91941		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEBO, ROBERT	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LA MESA, CA 91941		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4075/4629 Rpt: 4078/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEBO, ROBERT <hr/> 6 Contributor address; City; State; Zip Code LA MESA, CA 91941	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEBO, ROBERT <hr/> Contributor address; City; State; Zip Code LA MESA, CA 91941	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TECCA, JO H <hr/> Contributor address; City; State; Zip Code LIVINGSTON, MT 59047	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEDDER, KRISTA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89169	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) FEDERAL RESERVE BANK OF CHICAGO
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEETER, ANN <hr/> Contributor address; City; State; Zip Code HURST, TX 76054	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4076/4629 Rpt: 4079/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEETER, ANN	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code HURST, TX 76054		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEHAN, MICKEY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEHAN, MICKEY	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A C	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A C	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4077/4629 Rpt: 4080/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A C <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A C <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A C <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A CAROL <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4078/4629 Rpt: 4081/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEITELMAN, A CAROL <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELFORD, ELINOR <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33176	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELFORD, ELINOR <hr/> Contributor address; City; State; Zip Code MIAMI, FL 33176	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLEPSEN, TADD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) TELLEPSEN
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLER, NANCY <hr/> Contributor address; City; State; Zip Code NEWNAN, GA 30263	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4079/4629 Rpt: 4082/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLES JR, RAMON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		9 Employer (See Instructions) ACCENTURE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLES JR, RAMON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) ACCENTURE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLES JR, RAMON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) ACCENTURE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLES JR, RAMON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		Employer (See Instructions) ACCENTURE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLEZ, KAREN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) KAREN TELLEZ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4080/4629 Rpt: 4083/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLEZ, PAUL <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79932	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) RUHMANN LAW FIRM
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLEZ, PAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) RUHMANN LAW FIRM
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TELLEZ, PAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79932	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) RUHMANN LAW FIRM
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLE, CHARLES <hr/> Contributor address; City; State; Zip Code BRACKETTVILLE, TX 78832	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLE, ELLEN <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4081/4629 Rpt: 4084/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLE, ELLEN <hr/> 6 Contributor address; City; State; Zip Code LUFKIN, TX 75901	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLE, ELLEN <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLE, HANNAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705-2811	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) ATTORNEY-MEDIATOR		Employer (See Instructions) NINE DOTS MEDIATION
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLEMAN, ROBERTA <hr/> Contributor address; City; State; Zip Code NEWPORT, VT 05855	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLEMAN, ROBERTA <hr/> Contributor address; City; State; Zip Code NEWPORT, VT 05855	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4082/4629 Rpt: 4085/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLEMAN, ROBERTA <hr/> 6 Contributor address; City; State; Zip Code NEWPORT, VT 05855	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLEMAN, ROBERTA <hr/> Contributor address; City; State; Zip Code NEWPORT, VT 05855	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLES, PATTY R <hr/> Contributor address; City; State; Zip Code GIBSONVILLE, NC 27249	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLES, PATTY R <hr/> Contributor address; City; State; Zip Code GIBSONVILLE, NC 27249	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLES, PATTY R <hr/> Contributor address; City; State; Zip Code GIBSONVILLE, NC 27249	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4083/4629 Rpt: 4086/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLES, PATTY R <hr/> 6 Contributor address; City; State; Zip Code GIBSONVILLE, NC 27249	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLETON, AMELIA <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLETON, AMELIA <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEMPLETON, EDITH <hr/> Contributor address; City; State; Zip Code WEST CHESTER, PA 19382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN EYCK, KEVIN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4084/4629 Rpt: 4087/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN EYCK, KEVIN <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75002	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN EYCK, KEVIN <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENERELLI, DAVID <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FINANCIAL PLANNER		Employer (See Instructions) STRATEGIC FINANCIAL PLANNING, INC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENEYUCA, SHARYLL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENG, JUNWEI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) IT INDUSTRY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4085/4629 Rpt: 4088/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNANT, SANDRA <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) BOOKKEEPER		9 Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNENBAUM, GARY <hr/> Contributor address; City; State; Zip Code BASALT, CO 81621	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) PITKIN COUNTY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNENBAUM, GARY <hr/> Contributor address; City; State; Zip Code BASALT, CO 81621	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) PITKIN COUNTY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNERIELLO, CAROL <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) LACTATION CONSULTANT,RN		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNERIELLO, CAROL <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19119	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) LACTATION CONSULTANT,RN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4086/4629 Rpt: 4089/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNISON, CARA <hr/> 6 Contributor address; City; State; Zip Code PROSPER, TX 75078	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CONTENT MANAGER		9 Employer (See Instructions) QHQ INC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENORIO, DAPHNE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENORIO, DAPHNE <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEPPER, SHEILA <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEPPER, SHEILA <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4087/4629 Rpt: 4090/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERANTO, CHRISTINE <hr/> 6 Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23456	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) MARKETING MANAGER		9 Employer (See Instructions) LIFENET HEALTH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERMINI, ANTHONY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRELL, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRELL, LINDA <hr/> Contributor address; City; State; Zip Code NORMAN, OK 73071	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRELL, SHIRL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4088/4629 Rpt: 4091/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, IAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77003	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) SENIOR CONSULTANT		9 Employer (See Instructions) PELOTON CONSULTING GROUP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, JANIS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, JOYCE <hr/> Contributor address; City; State; Zip Code OGLESBY, TX 76561	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, LESLIE <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94112	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, SHILOH <hr/> Contributor address; City; State; Zip Code GARDNERVILLE, NV 89460	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CCHT DIALYSIS		Employer (See Instructions) D

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4089/4629 Rpt: 4092/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, SHILOH <hr/> 6 Contributor address; City; State; Zip Code GARDNERVILLE, NV 89460	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CCHT DIALYSIS		9 Employer (See Instructions) D
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, TONY <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY, TONY <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESCH, CHRIS <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESCH, DAVID <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) HOUSTON ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4090/4629 Rpt: 4093/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESCH, DAVID <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77407	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) SERVICE DESK TECHNICIAN		9 Employer (See Instructions) TDECU
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TESTA, JAMES A <hr/> Contributor address; City; State; Zip Code CAPE MAY, NJ 08204	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TETER, RICK <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEW, STEPHEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEWOLDE, HADDIS <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) ALL-TERRA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4091/4629 Rpt: 4094/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THACKER, KIPLING <hr/> 6 Contributor address; City; State; Zip Code EXCELSIOR, MN 55331	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SCIENTIST		9 Employer (See Instructions) LIFECORE BIOMEDICAL
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THACKER, KIPLING <hr/> Contributor address; City; State; Zip Code EXCELSIOR, MN 55331	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) LIFECORE BIOMEDICAL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THAI, UYEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NIAR
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THALER, GLENCORA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SENIOR EXECUTION CONSULTANT		Employer (See Instructions) WELLS FARGO BANK, NA
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THALER, GLENCORA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SENIOR EXECUTION CONSULTANT		Employer (See Instructions) WELLS FARGO BANK, NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4092/4629 Rpt: 4095/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THAMES, MARSHALL <hr/> 6 Contributor address; City; State; Zip Code PUYALLUP, WA 98375	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MECHANIC		9 Employer (See Instructions) BOEING COMPANY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THAMES, MARSHALL <hr/> Contributor address; City; State; Zip Code PUYALLUP, WA 98375	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MECHANIC		Employer (See Instructions) BOEING
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THAMES, TAMMY <hr/> Contributor address; City; State; Zip Code DUNCANVILLE, TX 75137	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ADMIN LAW JUDGE		Employer (See Instructions) SOCIAL SECURITY ADM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4093/4629 Rpt: 4096/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> 6 Contributor address; City; State; Zip Code BLAINE, WA 98230	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEAMAN, MARK <hr/> Contributor address; City; State; Zip Code BLAINE, WA 98230	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4094/4629 Rpt: 4097/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEEMAN, MARGARET <hr/> 6 Contributor address; City; State; Zip Code BOULDER, CO 80303	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEISE, NEIL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10002	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BETH ISRAEL HOSPITAL
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEISE, NEIL <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10002	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BETH ISRAEL HOSPITAL
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THEODOROU, ANASTASIOS <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) MILLER WEISBROD LLP
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THERIOT, LISA <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75150	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4095/4629 Rpt: 4098/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THERIOT, LISA <hr/> 6 Contributor address; City; State; Zip Code MESQUITE, TX 75150	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THERRIAN, KYLE <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROSENTHAL, KALABUS & THERRIAN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THERRIEN, RACHELLE <hr/> Contributor address; City; State; Zip Code BIDDEFORD, ME 04005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THETFORD, SHARON <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) QA SPECIALIST		Employer (See Instructions) TEXAS HHSC PI
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THETFORD, SHARON <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QA SPECIALIST		Employer (See Instructions) TEXAS HHSC PI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4096/4629 Rpt: 4099/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THETFORD, SHARON <hr/> 6 Contributor address; City; State; Zip Code MEXIA, TX 76667	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) QA SPECIALIST		9 Employer (See Instructions) TEXAS HHSC PI
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THETFORD, SHARON <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) QA SPECIALIST		Employer (See Instructions) TEXAS HHSC PI
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THETFORD, SHARON <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) QA SPECIALIST		Employer (See Instructions) TEXAS HHSC PI
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIBODEAU, DANIEL <hr/> Contributor address; City; State; Zip Code HUBBARD, TX 76648	Amount of Contribution (\$) \$40.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIBODEAU, POLLYANNA <hr/> Contributor address; City; State; Zip Code HUBBARD, TX 76648	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LAB TECH		Employer (See Instructions) EML

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4097/4629 Rpt: 4100/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIBODEAU, POLLYANNA <hr/> 6 Contributor address; City; State; Zip Code HUBBARD, TX 76648	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) LAB TECH		9 Employer (See Instructions) EML
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIBODEAUX, JOYCE <hr/> Contributor address; City; State; Zip Code HOUMA, LA 70360	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIEDE, CHRIS <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) DOW
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIEDE, CHRIS <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) DOW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIEL, RICHARD <hr/> Contributor address; City; State; Zip Code SEQUOIA NATIONAL PARK, CA 93262	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) BIOLOGICAL SCIENCE TECHNICIAN		Employer (See Instructions) NATIONAL PARK SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4098/4629 Rpt: 4101/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THILL, MARCIA <hr/> 6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75961	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, BARBARA <hr/> Contributor address; City; State; Zip Code BIRMINGHAM, AL 35234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, BECKY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ASSISTANT		Employer (See Instructions) GORDON HARTMAN ENT.
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, BRENDA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER/ARTIST		Employer (See Instructions) SELF
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, BRENDA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER/ARTIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4099/4629 Rpt: 4102/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, BRENDA <hr/> 6 Contributor address; City; State; Zip Code JOHNSON CITY, TX 78636	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED TEACHER/ARTIST		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77080	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ACCELERATED CHANGE
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4100/4629 Rpt: 4103/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code TYLER, TX 75703		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHERINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4101/4629 Rpt: 4104/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHY <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, CATHY <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DARLENE <hr/> Contributor address; City; State; Zip Code SEGUIN, TX 78155	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4102/4629 Rpt: 4105/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DARLENE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code SEGUIN, TX 78155		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DARLENE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEGUIN, TX 78155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DEEDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JONESBORO, AR 72401-5116		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, DONALD	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code VENTURA, CA 93003		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, GREGORY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code LAWRENCEVILLE, GA 30044		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4103/4629 Rpt: 4106/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JACALYN <hr/> 6 Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JACALYN <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JAMES <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JEFF <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JIA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SR. SEO STRATEGIST		Employer (See Instructions) JCPENNEY CORPORATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4104/4629 Rpt: 4107/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JIA <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SR. SEO STRATEGIST		9 Employer (See Instructions) JCPENNEY CORPORATE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, JULIE <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FLORAL DESIGNER & EVENT PLANNER		Employer (See Instructions) KATHI THOMAS DESIGN
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FLORAL DESIGNER & EVENT PLANNER		Employer (See Instructions) KATHI THOMAS DESIGN
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FLORAL DESIGNER & EVENT PLANNER		Employer (See Instructions) KATHI THOMAS DESIGN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4105/4629 Rpt: 4108/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHI <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) FLORAL DESIGNER & EVENT PLANNER		9 Employer (See Instructions) KATHI THOMAS DESIGN
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FLORAL DESIGNER & EVENT PLANNER		Employer (See Instructions) KATHI THOMAS DESIGN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FLORAL DESIGNER & EVENT PLANNER		Employer (See Instructions) KATHI THOMAS DESIGN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, KATHY <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, LARRIET <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75253	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4106/4629 Rpt: 4109/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, LARRIET <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75253	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, LINDA B <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, LYNDIA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76140	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, LYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MEDICAL TRANSCRIPTIONIST		Employer (See Instructions) VERBATIM TRANSCRIPTION
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) SOFTWARE		Employer (See Instructions) REGIONS BANK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4107/4629 Rpt: 4110/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$10.23
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, ROBERT <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, ROBERT <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, ROBERT <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, ROBERT <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4108/4629 Rpt: 4111/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SARA <hr/> 6 Contributor address; City; State; Zip Code CORVALLIS, OR 97330	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CLINICAL NUTRITION MANAGER		9 Employer (See Instructions) SODEXO
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SHIRLEY <hr/> Contributor address; City; State; Zip Code COLUMBIA, MD 21045	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SUZANNE <hr/> Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48323	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOANALYST		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SUZANNE <hr/> Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48323	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOANALYST		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SUZANNE <hr/> Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48323	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOANALYST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4109/4629 Rpt: 4112/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48323	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PSYCHOANALYST		9 Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, SUZANNE <hr/> Contributor address; City; State; Zip Code WEST BLOOMFIELD TOWNSHIP, MI 48323	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOANALYST		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, TAMMIE <hr/> Contributor address; City; State; Zip Code LOVEJOY, GA 30250	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) EVENTS COORDINATOR		Employer (See Instructions) CITY OF RIVERDALE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, TAMMIE <hr/> Contributor address; City; State; Zip Code LOVEJOY, GA 30250	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) EVENTS COORDINATOR		Employer (See Instructions) CITY OF RIVERDALE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, TINA <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) THOMAS PLUMBING INC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4110/4629 Rpt: 4113/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, TINA <hr/> 6 Contributor address; City; State; Zip Code PALESTINE, TX 75803	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) THOMAS PLUMBING INC
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, TINA <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) THOMAS PLUMBING INC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS-BARRY, MARGARET <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMASON, HEIDI <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMLEY, LORI <hr/> Contributor address; City; State; Zip Code HILLSBORO, OR 97124	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4111/4629 Rpt: 4114/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4112/4629 Rpt: 4115/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ALLISON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, AMY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ANITA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77063-3104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) FARNER & PERRIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4113/4629 Rpt: 4116/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, ANITA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77063-3104	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) FARNER & PERRIN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, BEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, CARMELLA <hr/> Contributor address; City; State; Zip Code INDIAN HEAD, MD 20640	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) TELEDYNE FLIR
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, CHERYL <hr/> Contributor address; City; State; Zip Code ORLANDO, FL 32825	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DENIS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROGRAMMER		Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4114/4629 Rpt: 4117/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DENIS	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78752		
8 Principal occupation / Job title (See Instructions) PROGRAMMER		9 Employer (See Instructions) UNIVERSITY OF TEXAS AT AUSTIN
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DIANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DIANNE	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DIANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DIANNE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78664		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4115/4629 Rpt: 4118/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, DIANNE <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, GEORGE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WEB APPLICATION PROGRAMMER		Employer (See Instructions) RVH SOLUTIONS, INC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, GREGORY <hr/> Contributor address; City; State; Zip Code BEDFORD, VA 24523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMIN ASSIST		Employer (See Instructions) BECHTEL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMIN ASSIST		Employer (See Instructions) BECHTEL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4116/4629 Rpt: 4119/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JANICE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77029	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADMIN ASSIST		9 Employer (See Instructions) BECHTEL
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JANICE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77029	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMIN ASSIST		Employer (See Instructions) BECHTEL
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JEFF <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JEFF <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JEFF <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4117/4629 Rpt: 4120/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRI	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code TEMPE, AZ 85284		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code BEDFORD, TX 76022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code BEDFORD, TX 76022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code BEDFORD, TX 76022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRY	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code BEDFORD, TX 76022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4118/4629 Rpt: 4121/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRY <hr/> 6 Contributor address; City; State; Zip Code BEDFORD, TX 76022	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JERRY <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76022	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JOANN <hr/> Contributor address; City; State; Zip Code TERRELL HILLS, TX 78209	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, JOSEPH <hr/> Contributor address; City; State; Zip Code THURMONT, MD 21788	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KAREN <hr/> Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4119/4629 Rpt: 4122/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KAREN <hr/> 6 Contributor address; City; State; Zip Code NORTH RICHLAND HILLS, TX 76182	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KATHARINE T <hr/> Contributor address; City; State; Zip Code SOUTH TAMWORTH, NH 03883-0048	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KATHARINE T. <hr/> Contributor address; City; State; Zip Code SOUTH TAMWORTH, NH 03883-0048	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KATHLEEN <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KATHLEEN <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4120/4629 Rpt: 4123/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KELVIN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$190.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KELYN <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MEDICAL CODER		Employer (See Instructions) UNITED HEALTH GROUP
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KELYN <hr/> Contributor address; City; State; Zip Code SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MEDICAL CODER		Employer (See Instructions) UNITED HEALTH GROUP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, LAURALEE <hr/> Contributor address; City; State; Zip Code MARINA DEL REY, CA 90292-6797	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, NACOLE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78630	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4121/4629 Rpt: 4124/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, PAUL <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79902	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) FIREFIGHTER		9 Employer (See Instructions) CITY OF EL PASO
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, PAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF EL PASO
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, PAUL <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) CITY OF EL PASO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4122/4629 Rpt: 4125/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code FRISCO, TX 75036		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRISCO, TX 75036		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FRISCO, TX 75036		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRISCO, TX 75036		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRISCO, TX 75036		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4123/4629 Rpt: 4126/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code FRISCO, TX 75036		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FRISCO, TX 75036		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RAMONA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FRISCO, TX 75036		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RONDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code JEFFERSON CITY, MO 65109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SHARON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KATY, TX 77450		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4124/4629 Rpt: 4127/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SHELDON <hr/> 6 Contributor address; City; State; Zip Code ALAMO, TX 78516	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SHELLIE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) RUHTER & REYNOLDS, INC.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SUSAN <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SUZANN <hr/> Contributor address; City; State; Zip Code DUBLIN, TX 76446	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) WRITER AND ARTIST		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SUZANN <hr/> Contributor address; City; State; Zip Code DUBIN, TX 76446	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARTIST AND WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4125/4629 Rpt: 4128/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, SUZANN <hr/> 6 Contributor address; City; State; Zip Code DUBIN, TX 76446	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ARTIST AND WRITER		9 Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON-BOWERS, ELISE <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088-8939	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LOCAL GOVERNMENT		Employer (See Instructions) CITY OF ROWLETT
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON-BOWERS, ELISE <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088-8939	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) LOCAL GOVERNMENT		Employer (See Instructions) CITY OF ROWLETT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMSEN, CYNTHIA <hr/> Contributor address; City; State; Zip Code ORMOND BEACH, FL 32174	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMSON, JAN <hr/> Contributor address; City; State; Zip Code RANCHO PALOS VERDES, CA 90275-4422	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4126/4629 Rpt: 4129/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORBURN, REBECCA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) MARKETING CONSULTANT		9 Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORMAN, TIFFANY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) SCHOOL FOR THE BLIND
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORMAN, TIFFANY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) SCHOOL FOR THE BLIND
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNBERG, ANN <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91506	Amount of Contribution (\$) \$524.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNBURG, UTE <hr/> Contributor address; City; State; Zip Code RED OAK, TX 75154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4127/4629 Rpt: 4130/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNE, WORLEY <hr/> 6 Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91403	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) PROFESSOR OF ENGLISH		9 Employer (See Instructions) LOS ANGELES VALLEY COLLEGE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNE, WORLEY <hr/> Contributor address; City; State; Zip Code SHERMAN OAKS, CA 91403	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) PROFESSOR OF ENGLISH		Employer (See Instructions) LOS ANGELES VALLEY COLLEGE
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, ASHLEY <hr/> Contributor address; City; State; Zip Code WACO, TX 76707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ASHLEY THORNTON
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, ASHLEY <hr/> Contributor address; City; State; Zip Code WACO, TX 76707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, ASHLEY <hr/> Contributor address; City; State; Zip Code WACO, TX 76707	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4128/4629 Rpt: 4131/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, ASHLEY <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76707	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) ASHLEY THORNTON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, JUDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) APPLE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, ROSEANN <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORNTON, ROSEANN <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORSTENS, PAMELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4129/4629 Rpt: 4132/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THRASH, CHARLES <hr/> 6 Contributor address; City; State; Zip Code VICTORIA, TX 77904	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THRASH, KAREN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIREE		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THRASHER, MARY <hr/> Contributor address; City; State; Zip Code FLINT, TX 75762	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THRIFT, STEPHANIE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THRIFT, STEPHANIE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4130/4629 Rpt: 4133/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THROOP, MARY	7 Amount of Contribution (\$) \$35.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78726		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THROOP, MARY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78726		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THURMAN, KATHIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BRENTWOOD, TN 37027		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THURMAN, KATHIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BRENTWOOD, TN 37027		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THURMAN, SUSAN	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code JACKSON, MI 49203		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4131/4629 Rpt: 4134/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIAN, CLARE <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DATA ANALYTICS		9 Employer (See Instructions) KAISER
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIAN, XIA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90065	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DATA ANALYTICS		Employer (See Instructions) KAISER
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIBEREND, KATHRYN <hr/> Contributor address; City; State; Zip Code NAPA, CA 94559	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR SYSTEMS LEAD		Employer (See Instructions) TREASURY WINE ESTATES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIDMORE, CANDACE <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIDWELL, PHYLLIS <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433-1517	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) PRAIRIE VIEW A&M UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4132/4629 Rpt: 4135/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEDE, SARA	7 Amount of Contribution (\$) \$3.13
6 Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEDE, SARA	Amount of Contribution (\$) \$3.13
Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80907		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEKEN, JANAY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76205		
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) CITY OF MCKINNEY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEKEN, JANAY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DENTON, TX 76205		
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) CITY OF MCKINNEY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEKEN, LINDA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78728		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4133/4629 Rpt: 4136/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMENS, JIM <hr/> 6 Contributor address; City; State; Zip Code LAGUNA NIGUEL, CA 92677	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MACHINIST		9 Employer (See Instructions) DESCO
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIERMAN, ANDREW <hr/> Contributor address; City; State; Zip Code SAGINAW, MI 48603	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIERMAN, ANDREW <hr/> Contributor address; City; State; Zip Code SAGINAW, MI 48603	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIGGELAAR, BETH <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIGGELAAR, BETH <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4134/4629 Rpt: 4137/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIGNER, RACHEL <hr/> 6 Contributor address; City; State; Zip Code EVANSTON, IL 60201	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) ENDEAVOR HEALTH
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIJERINA, CELIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PRESCHOOL DIRECTOR		Employer (See Instructions) TUMC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIKTIN, THOMAS <hr/> Contributor address; City; State; Zip Code LARCHMONT, NY 10538-1114	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILCHIN, CARLA <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21218	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) JOHNS HOPKINS
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILGER, DEBORAH <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) SHELTON SCHOOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4135/4629 Rpt: 4138/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLEY, CHARLES <hr/> 6 Contributor address; City; State; Zip Code LEESBURG, VA 20176	7 Amount of Contribution (\$) \$50.25
8 Principal occupation / Job title (See Instructions) FINANCIAL MANAGEMENT ANALYST		9 Employer (See Instructions) DOD CIVILIAN
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLEY, FRANK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CORPORATE FINANCE CONSULTANT		Employer (See Instructions) SEATONHILL
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLEY, FRANK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CORPORATE FINANCE CONSULTANT		Employer (See Instructions) SEATONHILL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILTON-JONES, CARRIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) STUDENT, WRITER		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILTON-JONES, CARRIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) STUDENT, WRITER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4136/4629 Rpt: 4139/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILTON-JONES, CARRIE <hr/> 6 Contributor address; City; State; Zip Code PORTLAND, OR 97219	7 Amount of Contribution (\$) \$20.23
8 Principal occupation / Job title (See Instructions) STUDENT, WRITER		9 Employer (See Instructions) SELF
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILTONJONES, CARRIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STUDENT, WRITER		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILTONJONES, CARRIE <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STUDENT, WRITER		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMBERS-HJERMSTAD, SHEILA <hr/> Contributor address; City; State; Zip Code CHAMPLIN, MN 55316	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNERS		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMKEN, JEAN <hr/> Contributor address; City; State; Zip Code NAPA, CA 94558	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4137/4629 Rpt: 4140/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMKO, RICHARD <hr/> 6 Contributor address; City; State; Zip Code KINGSTON, PA 18704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMKO, RICHARD <hr/> Contributor address; City; State; Zip Code KINGSTON, PA 18704	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMM, PAT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMMONS, PENNY <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90046-7018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMS, IAN <hr/> Contributor address; City; State; Zip Code PLYMOUTH, MI 48170	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FORD MOTOR COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4138/4629 Rpt: 4141/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIMS, IAN <hr/> 6 Contributor address; City; State; Zip Code PLYMOUTH, MI 48170	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) FORD MOTOR COMPANY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINDALL, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) GOTRANSVERSE
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINDALL, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) GOTRANSVERSE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINDEL, PATRICIA <hr/> Contributor address; City; State; Zip Code HONEY GROVE, TX 75446-7816	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINEO, SARA <hr/> Contributor address; City; State; Zip Code HAWTHORNE, NJ 07506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) MARSH

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4139/4629 Rpt: 4142/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINGLEY, DILLA <hr/> 6 Contributor address; City; State; Zip Code LINCOLN, MA 01773	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINGUELY, TOM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IMMIGRATION OFFICER		Employer (See Instructions) USCIS
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IMMIGRATION OFFICER		Employer (See Instructions) USCIS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IMMIGRATION OFFICER		Employer (See Instructions) USCIS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4140/4629 Rpt: 4143/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052		
8 Principal occupation / Job title (See Instructions) IMMIGRATION OFFICER		9 Employer (See Instructions) USCIS
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIPPINS, MICHELLE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) WGU
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIPPS, STEPHEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77019		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRANA, GAIL R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10024-5802		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CUNY
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRANA, GAIL R	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code NEW YORK, NY 10024-5802		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CUNY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4141/4629 Rpt: 4144/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> 6 Contributor address; City; State; Zip Code CANTERBURY, NH 03224	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> Contributor address; City; State; Zip Code CANTERBURY, NH 03224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> Contributor address; City; State; Zip Code CANTERBURY, NH 03224	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> Contributor address; City; State; Zip Code CANTERBURY, NH 03224	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> Contributor address; City; State; Zip Code CANTERBURY, NH 03224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4142/4629 Rpt: 4145/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> 6 Contributor address; City; State; Zip Code CANTERBURY, NH 03224	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIRRELL-WYSOCKI, SARAH <hr/> Contributor address; City; State; Zip Code CANTERBURY, NH 03224	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TITTERINGTON, SHELLEY <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TITTERINGTON, SHELLEY <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TITTERINGTON, SHELLEY <hr/> Contributor address; City; State; Zip Code CEDAR CREEK, TX 78612	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4143/4629 Rpt: 4146/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIZARD, CLAIRE <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBEY, VIRGINIA <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBEY, VIRGINIA <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBEY, VIRGINIA <hr/> Contributor address; City; State; Zip Code ALAMEDA, CA 94501	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBIAS, ARON <hr/> Contributor address; City; State; Zip Code CAMILLUS, NY 13031	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) SYRACUSE UNIVERSITY

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4144/4629 Rpt: 4147/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBIAS, EDUARDO <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) VIDEO PRODUCER		9 Employer (See Instructions) TCEQ
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBIAS, EDUARDO <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VIDEO PRODUCER		Employer (See Instructions) TCEQ
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBIAS, GLORIA <hr/> Contributor address; City; State; Zip Code READING, PA 19605	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOBIN, MATTHEW MORRIS <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, CAROLYN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ART INSTRUCTOR		Employer (See Instructions) SELF EMPLOYED

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4145/4629 Rpt: 4148/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code SAVANNAH, GA 31401	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, JOE <hr/> Contributor address; City; State; Zip Code HUDSON OAKS, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, JOE <hr/> Contributor address; City; State; Zip Code HUDSON OAKS, TX 76087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, JONATHON <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DESIGN		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, LARRY <hr/> Contributor address; City; State; Zip Code THE COLONY, TX 75056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4146/4629 Rpt: 4149/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, RUTH <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, RUTH <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD, RUTH <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOENJES, LARRY <hr/> Contributor address; City; State; Zip Code CLEAR LAKE SHORES, TX 77565	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOENJES, LAURENCE <hr/> Contributor address; City; State; Zip Code KEMAH, TX 77565	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4147/4629 Rpt: 4150/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOFFERI, JEANNE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78260	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DOCTOR		9 Employer (See Instructions) DHA
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLAND, LAMAR <hr/> Contributor address; City; State; Zip Code PALMDALE, CA 93550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLBOE, LEIGH <hr/> Contributor address; City; State; Zip Code FAYETTE, ME 04349	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) STAFF DIRECTOR		Employer (See Instructions) CAMP VEGA
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLENTINO, PINKY <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90814	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLIVER, CHIQUITTA <hr/> Contributor address; City; State; Zip Code HUTTO, TX 78634	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHARMACY TECHNICIAN II		Employer (See Instructions) NORTH AUSTIN MEDICAL CENTER

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4148/4629 Rpt: 4151/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLEFSON, LINDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77096		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLEFSON, LINDA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLERTON, DEANA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLERTON, DEANA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) PARLIAMENTARIAN		Employer (See Instructions) SELF
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLERTON, DEANA	Amount of Contribution (\$) \$124.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) PARLIAMENTARIAN		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4149/4629 Rpt: 4152/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLERTON, DEANA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78729		
8 Principal occupation / Job title (See Instructions) ARTIST		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KYLE, TX 78640-5732		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KYLE, TX 78640-5732		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code KYLE, TX 78640-5732		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLESON, WILDA W	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code KYLE, TX 78640-5732		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4150/4629 Rpt: 4153/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLEY, MOLLY <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75080	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MARKETING DIRECTOR		9 Employer (See Instructions) DATA INNOVATIONS
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLEY, MOLLY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MARKETING DIRECTOR		Employer (See Instructions) DATA INNOVATIONS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLLISON, TOBY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) TOBY TOLLISON
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLPINRUD, ALICIA <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOLSON, MARKUS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) SELF

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4151/4629 Rpt: 4154/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMAC, EMILY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75224	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) GARTNER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMALIN, PAM <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OUTDOOR ADVERTISING		Employer (See Instructions) SELF
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMALIN, PAM <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OUTDOOR ADVERTISING		Employer (See Instructions) SELF
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMALIN, PAM <hr/> Contributor address; City; State; Zip Code ROYSE CITY, TX 75189	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OUTDOOR ADVERTISING		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMBERLIN, JESSICA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$48.00
Principal occupation / Job title (See Instructions) BAKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4152/4629 Rpt: 4155/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMCZYK SR, EDWARD <hr/> 6 Contributor address; City; State; Zip Code VESTAL, NY 13850-3303	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMERLIN, MARY E <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMIN		Employer (See Instructions) YCCC
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMLINSON, MARIA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) ALLIANCEHCM
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMLINSON, MARIA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EXECUTIVE ASSISTANT		Employer (See Instructions) ALLIANCEHCM
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMLINSON, ROBERT <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546-3201	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4153/4629 Rpt: 4156/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMOTAKI, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75025	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) PLANO ISD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMOTAKI, CYNTHIA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMOTAKI, CYNTHIA <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMPKINS, MICHAEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SUPPLY CHAIN MANAGEMENT		Employer (See Instructions) CENTERPOINT ENERGY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOMPKINS, ROBYN <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RESEARCH ADMINISTRATOR		Employer (See Instructions) UT HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4154/4629 Rpt: 4157/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TONES, KEVIN <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) NASA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TONEY, JAMES <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76102	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TONEY, TRUDY <hr/> Contributor address; City; State; Zip Code BATTLE GROUND, WA 98604	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TONG, DAN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60645	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COMPUTER CONSULTANT		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TONG, DAN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60645	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMPUTER CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4155/4629 Rpt: 4158/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOOHEY, CINDY <hr/> 6 Contributor address; City; State; Zip Code SANTA BARBARA, CA 93103	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOPERZER, CHARLES <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOPERZER, CHARLES <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOPERZER, CHARLES <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORGUSON, GLEN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) SISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4156/4629 Rpt: 4159/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORGUSON, GLEN <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79936	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) SISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORGUSON, LAURA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORGUSON, LAURA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORGUSON, LAURA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) YSLETA ISD
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORGUSON, LAURA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79936	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4157/4629 Rpt: 4160/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORJUSSEN, GEORGE <hr/> 6 Contributor address; City; State; Zip Code SMITHVILLE, NJ 08205	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORMA, TRACY <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75801	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) WRITER/EDITOR/OWNER		Employer (See Instructions) TORMA COMMUNICATIONS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORPEY, JAY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) TECH		Employer (See Instructions) COMTEX
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRE, ANDREW <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BUYER		Employer (See Instructions) SIEMENS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, DIANE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INDEPENDENT LIFE INSURANCE AGENT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4158/4629 Rpt: 4161/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, DIANE <hr/> 6 Contributor address; City; State; Zip Code BURLINGAME, CA 94010	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, DIANE <hr/> Contributor address; City; State; Zip Code BURLINGAME, CA 94010	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RALPH <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76137	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RALPH <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RALPH <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4159/4629 Rpt: 4162/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RALPH <hr/> 6 Contributor address; City; State; Zip Code FT WORTH, TX 76137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RICHARD <hr/> Contributor address; City; State; Zip Code PFLUGRVILLE, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RICHARD <hr/> Contributor address; City; State; Zip Code PFULGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, RICHARD <hr/> Contributor address; City; State; Zip Code PFULGERVILLE, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, SALLY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4160/4629 Rpt: 4163/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, SALLY <hr/> 6 Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, SALLY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, SALLY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, SALLY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES, TOMAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4161/4629 Rpt: 4164/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES-STAHN, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78283	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORRES-STAHN, CATHERINE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78283	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOSSMAN, MARIBEL <hr/> Contributor address; City; State; Zip Code CATHEDRAL CITY, CA 92234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOTHERO, LAUREN <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACTOR		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUBIA, NICOLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4162/4629 Rpt: 4165/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUBIN, JIMMY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209-2682	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRESIDENT		9 Employer (See Instructions) TOUBIN INSURANCE AGENCY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUSIGNANT, RICHARD <hr/> Contributor address; City; State; Zip Code PLYMOUTH, MN 55441	Amount of Contribution (\$) \$5.09
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUSIGNANT, RICHARD <hr/> Contributor address; City; State; Zip Code PLYMOUTH, MN 55441	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUT, ANN <hr/> Contributor address; City; State; Zip Code HOPKINS, MN 55305	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOUT, ANN <hr/> Contributor address; City; State; Zip Code HOPKINS, MN 55305	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4163/4629 Rpt: 4166/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOVAR, BLANCA <hr/> 6 Contributor address; City; State; Zip Code EDINBURG, TX 78539	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) LINDA VISTA REAL ESTATE LLC
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNE, VIRGINIA <hr/> Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNE, VIRGINIA <hr/> Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNE, VIRGINIA <hr/> Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNE, VIRGINIA <hr/> Contributor address; City; State; Zip Code NEWPORT BEACH, CA 92660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4164/4629 Rpt: 4167/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNS, KATHY <hr/> 6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) QUALITY MANAGER		9 Employer (See Instructions) REAL ALE BREWING CO.
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNSEND, ELIZABETH <hr/> Contributor address; City; State; Zip Code READING, MA 01867	Amount of Contribution (\$) \$1.66
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) KRONOS BIO
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNSEND, ELIZABETH <hr/> Contributor address; City; State; Zip Code READING, MA 01867	Amount of Contribution (\$) \$1.66
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) KRONOS BIO
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNSEND, EMILY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNSEND, WARREN <hr/> Contributor address; City; State; Zip Code KEMPER, TX 76539	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CLINICAL SOCIAL WORKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4165/4629 Rpt: 4168/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAHAN, JOSEPH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
8 Principal occupation / Job title (See Instructions) CASE MANAGER		9 Employer (See Instructions) THE CHILDREN'S CENTER, INC.
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAHAN, JOSEPH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) CASE MANAGER		Employer (See Instructions) THE CHILDREN'S CENTER, INC.
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAHAN, LUKE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78705		
Principal occupation / Job title (See Instructions) CASHIER		Employer (See Instructions) DUNKIN DONUTS
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAHAN, LUKE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78705		
Principal occupation / Job title (See Instructions) CASHIER		Employer (See Instructions) DUNKIN DONUTS
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAHAN III, HOWARD	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77725		
Principal occupation / Job title (See Instructions) PEACE KEEPER		Employer (See Instructions) CITY OF BEAUMONT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4166/4629 Rpt: 4169/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAHAN III, HOWARD <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77725	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PEACE KEEPER		9 Employer (See Instructions) CITY OF BEAUMONT
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAIN, JEFFREY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230-2745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAIN, JEFFREY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230-2745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRANGUCCI, NEALE <hr/> Contributor address; City; State; Zip Code SUMMIT, NJ 07901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INVESTMENT RESEARCH		Employer (See Instructions) MASON CAPITAL
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRANGUCCI, NEALE <hr/> Contributor address; City; State; Zip Code SUMMIT, NJ 07901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INVESTMENT RESEARCH		Employer (See Instructions) MASON CAPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4167/4629 Rpt: 4170/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAUBE, VICTORIA <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10024	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) CONCORD THEATRICALS
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAUTMAN, ALLAN <hr/> Contributor address; City; State; Zip Code SANTA CLARITA, CA 91350	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) PUPPETEER		Employer (See Instructions) SELF
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAUTMAN, ALLAN <hr/> Contributor address; City; State; Zip Code SANTA CLARITA, CA 91350	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) PUPPETEER		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAUTWEIN, RICHARD <hr/> Contributor address; City; State; Zip Code PEQUANNICK, NJ 07440-1122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ARCHITECT		Employer (See Instructions) SELF EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAVIS, JAMES <hr/> Contributor address; City; State; Zip Code FAIRVIEW, TX 75069	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4168/4629 Rpt: 4171/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAVIS, JAMES <hr/> 6 Contributor address; City; State; Zip Code FAIRVIEW, TX 75069	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code QUITMAN, TX 75783	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code QUITMAN, TX 75783	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAYLOR, LARRY <hr/> Contributor address; City; State; Zip Code QUITMAN, TX 75783	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREBICKA, VIOLA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) QUINN EMANUEL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4169/4629 Rpt: 4172/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREBICKA, VIOLA <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) QUINN EMANUEL
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREBICKA, VIOLA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) QUINN EMANUEL
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREDWAY, CJ <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREE, EVERDEEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$1,000.42
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREIBER, ANDRE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LEGISLATIVE DIRECTOR		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4170/4629 Rpt: 4173/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREIBER, ANDRE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LEGISLATIVE DIRECTOR		9 Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREIBER, ANDRE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGISLATIVE DIRECTOR		Employer (See Instructions) REPRESENTATIVE SHERYL COLE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREIBER, ANDRE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGISLATIVE DIRECTOR		Employer (See Instructions) REPRESENTATIVE SHERYL COLE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREIDER, JEAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREIDER, JEAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4171/4629 Rpt: 4174/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRELOAR, SHARAELL <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREMPER, MARILYN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SELF
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREMPER, MARILYN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREMPER, MARILYN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRESTER, ANGELA <hr/> Contributor address; City; State; Zip Code SAUGATUCK, MI 39453	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) BRONSON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4172/4629 Rpt: 4175/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ANNA <hr/> 6 Contributor address; City; State; Zip Code LAREDO, TX 78045	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ANNA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ANNA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ANNA <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, DAVID <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4173/4629 Rpt: 4176/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, DIEGO	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77084		
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) MYSELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, GUILLERMO	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code LAREDO, TX 78045-8159		
Principal occupation / Job title (See Instructions) DISTRIBUTION		Employer (See Instructions) GUILLERMO TREVINO
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, JENNIFER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77047		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, JENNIFER	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HOUSTON, TX 77047		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, LAUREL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78737		
Principal occupation / Job title (See Instructions) BIOLOGIST		Employer (See Instructions) THE UNIVERSITY OF TEXAS AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4174/4629 Rpt: 4177/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ROBERTO <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ROBERTO <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ROBERTO <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ROBERTO <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, ROBERTO <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4175/4629 Rpt: 4178/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO, VICTORIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78756	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) BCBS TX
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVINO III, BALDOMERO <hr/> Contributor address; City; State; Zip Code BROWNSVILLE, TX 78521	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) MR B MOTOR CO
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREVETT, DAVID <hr/> Contributor address; City; State; Zip Code BROOKLINE, MA 02446	Amount of Contribution (\$) \$17.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREXLER, ALICE <hr/> Contributor address; City; State; Zip Code LEXINGTON, MA 02421-8063	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREY MARTINEZ FISCHER, TEXAS FRIENDS OF <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201	Amount of Contribution (\$) \$7,000.00
Principal occupation / Job title (See Instructions) CAMPAIGN		Employer (See Instructions) ACCOUNT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4176/4629 Rpt: 4179/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREY MARTINEZ FISCHER, TEXAS FRIENDS OF	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
8 Principal occupation / Job title (See Instructions) CAMPAIGN		9 Employer (See Instructions) ACCOUNT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREY MARTINEZ FISCHER, TEXAS FRIENDS OF	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) CAMPAIGN		Employer (See Instructions) ACCOUNT
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREY MARTINEZ FISCHER, TEXAS FRIENDS OF	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) CAMPAIGN		Employer (See Instructions) ACCOUNT
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREY MARTINEZ FISCHER, TEXAS FRIENDS OF	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) CAMPAIGN		Employer (See Instructions) ACCOUNT
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREY MARTINEZ FISCHER, TEXAS FRIENDS OF	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78201		
Principal occupation / Job title (See Instructions) CAMPAIGN		Employer (See Instructions) ACCOUNT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4177/4629 Rpt: 4180/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREZZA, MELISSA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75025	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) FOOD SAFETY AUDITOR		9 Employer (See Instructions) MERIEUX
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIBE OF TEXAS, KICKAPOO TRADITIONAL <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions) KICKAPOO TRADITIONAL		Employer (See Instructions) TRIBE OF TEXAS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIBE OF TEXAS, KICKAPOO TRADITIONAL <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) KICKAPOO TRADITIONAL		Employer (See Instructions) TRIBE OF TEXAS
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIBE OF TEXAS, KICKAPOO TRADITIONAL <hr/> Contributor address; City; State; Zip Code EAGLE PASS, TX 78852	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) KICKAPOO TRADITIONAL		Employer (See Instructions) TRIBE OF TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRILLO, BRENDA <hr/> Contributor address; City; State; Zip Code HORIZON CITY, TX 79928	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) REAL ESTATE AGENT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4178/4629 Rpt: 4181/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIMBLE, JOAN	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240-3624		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINIDAD, JESUS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SEGUIN, TX 79155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINIDAD, JESUS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SEGUIN, TX 79155		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINKA, CARRIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINKA, CARRIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4179/4629 Rpt: 4182/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINKA, CARRIE <hr/> 6 Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINKA, CARRIE <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINKA, CARRIE <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, AR 72701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIPI, SERENA <hr/> Contributor address; City; State; Zip Code KINGWOOD, TX 77339	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIPP, LYNN <hr/> Contributor address; City; State; Zip Code MODESTO, CA 95356	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4180/4629 Rpt: 4183/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIPP, LYNN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code MODESTO, CA 95356		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRISTAN, STEPHANIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRITCHLER, JOAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRITCHLER, JOAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRITCHLER, JOAN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4181/4629 Rpt: 4184/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIVINIA, CHARLES <hr/> 6 Contributor address; City; State; Zip Code MOORESTOWN, NJ 08057	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) WINE DISTRIBUTION		9 Employer (See Instructions) REGAL WINE IMPORTS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROCHIO, AIMEE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GUIDEHOUSE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROIISI, CATHERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS SCHOOL OF PUBLIC HEALTH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROLL, SHARON <hr/> Contributor address; City; State; Zip Code BIG CREEK, CA 93605	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROLLER, MELANY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4182/4629 Rpt: 4185/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROUTT, JAMES	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SPOKANE, WA 99224		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROXELL, DAVID	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROY, DANIELLE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROY, MARIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code RUMFORD, RI 02916		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROYER, BEVERLY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code CHURUBUSCO, IN 46723		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4183/4629 Rpt: 4186/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4184/4629 Rpt: 4187/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUE-COURAGE, ZADA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUEBA, JIMMY <hr/> Contributor address; City; State; Zip Code HELOTES, TX 78023	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) JAIME TRUEBA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4185/4629 Rpt: 4188/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUESDELL, MARK	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUESDELL, MARK	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78633		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUITT, JANICE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PLANO, TX 75075		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUITT, TERRI	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUJILLO, EDDIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MONTEBELLO, CA 90640		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4186/4629 Rpt: 4189/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUJILLO, EDDIE <hr/> 6 Contributor address; City; State; Zip Code MONTEBELLO, CA 90640	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUMBO, ISAAC <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) KNIGHTED SERVICES INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUSTY, MARY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRUSTY, MARY <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSAI, CHING-CHANG <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$8.02
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4187/4629 Rpt: 4190/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSAI, CHING-CHANG <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77025	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSUDA, CHRISTIANE <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92009	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) PORTFOLIO MANAGER		Employer (See Instructions) 3455 CAMINO CORTE
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSUNEYOSHI, NAOMI <hr/> Contributor address; City; State; Zip Code KALAHEO, HI 96741	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSUNEYOSHI, NAOMI <hr/> Contributor address; City; State; Zip Code KALAHEO, HI 96741	Amount of Contribution (\$) \$3.57
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TU, YAN <hr/> Contributor address; City; State; Zip Code LAKE WORTH, FL 33467	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) NCCI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4188/4629 Rpt: 4191/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUBBY, GARY <hr/> 6 Contributor address; City; State; Zip Code AVON PARK, FL 33825	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) DISABLED 73 YR. OLD MARINE COMBAT VETERAN		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUBBY, GARY <hr/> Contributor address; City; State; Zip Code AVON PARK, FL 33825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DISABLED 73 YR. OLD MARINE COMBAT VETERAN		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCCILLO, LIZ <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, BENNY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76040	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) EARTH HAULERS
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, BENNY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76040	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) EARTH HAULERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4189/4629 Rpt: 4192/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, BYRON <hr/> 6 Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, BYRON <hr/> Contributor address; City; State; Zip Code MARBLE FALLS, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		Employer (See Instructions) OUR REVOLUTION TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		Employer (See Instructions) OUR REVOLUTION TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		Employer (See Instructions) OUR REVOLUTION TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4190/4629 Rpt: 4193/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
8 Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		9 Employer (See Instructions) OUR REVOLUTION TEXAS
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) TRADE JUSTICE ED FUND
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		Employer (See Instructions) OUR REVOLUTION TEXAS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		Employer (See Instructions) OUR REVOLUTION TEXAS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAMPASAS, TX 76550		
Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		Employer (See Instructions) OUR REVOLUTION TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4191/4629 Rpt: 4194/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON <hr/> 6 Contributor address; City; State; Zip Code LAMPASAS, TX 76550	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) STATEWIDE COORDINATOR		9 Employer (See Instructions) OUR REVOLUTION TEXAS
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, CLAYTON <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ORGANIZER		Employer (See Instructions) TRADE JUSTICE ED FUND
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, ELIOT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, ELIOT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, ELIOT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4192/4629 Rpt: 4195/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, JAIDEN <hr/> 6 Contributor address; City; State; Zip Code ARGYLE, TX 76226	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ESS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, MARTHA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, MARTHA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, P LIANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, PATTY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4193/4629 Rpt: 4196/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, RICK <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, RICK <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, TERRY <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, TERRY <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUCKER, TERRY <hr/> Contributor address; City; State; Zip Code LAMPASAS, TX 76550	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4194/4629 Rpt: 4197/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUDOSA, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11219	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) ANALYST		9 Employer (See Instructions) 32BJ
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUECHE, JANE <hr/> Contributor address; City; State; Zip Code OAK PARK, IL 60302	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) THERMO FISHER SCIENTIFIC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TULLOCH, BARBARA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE OFFICER		Employer (See Instructions) DHHS/IHS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUNSTILL, WILLIAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$527.21
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUO, RUEI <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4195/4629 Rpt: 4198/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURBENSON, KATHLEEN <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURBENSON, KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURBENSON, KATHLEEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURCOTTE, RICHARD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75209	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUREK, KENNETH <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92131	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TUREK LAW PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4196/4629 Rpt: 4199/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUREK, LINDA <hr/> 6 Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURELLA, ALICE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218-4226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRES		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURKNETT, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) IBM
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURKNETT, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) MICROSOFT
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURKNETT, ROBERT <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) IBM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4197/4629 Rpt: 4200/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURKNETT, ROBERT <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) MICROSOFT
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURMAN, NICKI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, CATHEY LEEANN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CASE MANAGER		Employer (See Instructions) SYNEOS HEALTH
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, CHRIS <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CAMPAIGN ACCOUNT		Employer (See Instructions) CAMPAIGN ACCOUNT
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, CHRIS <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75054	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CAMPAIGN ACCOUNT		Employer (See Instructions) CAMPAIGN ACCOUNT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4198/4629 Rpt: 4201/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, ELDERINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77048	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, ELDERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, ELDERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, ELDERINE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77048	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, KANDICE <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75027	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) HEALTHJOY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4199/4629 Rpt: 4202/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, LORY <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) INTERIOR DECORATOR		9 Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, SUE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75252	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, SYLVESTER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONGRESSMAN-ELECT		Employer (See Instructions) US HOUSE OF REPRESENTATIVES
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, TERESA <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76107	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER III, ROBERT L <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NETWORKING TECH		Employer (See Instructions) SW BELL TELEPHONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4200/4629 Rpt: 4203/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER III, ROBERT L <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75032	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NETWORKING TECH		9 Employer (See Instructions) SW BELL TELEPHONE
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER III, ROBERT L <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75032	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NETWORKING TECH		Employer (See Instructions) SW BELL TELEPHONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER KOCAK, LINDSEY <hr/> Contributor address; City; State; Zip Code KNOXVILLE, TN 37917	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) X-ENERGY
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER-PEARSON, KATHERINE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARCHAEOLOGIST		Employer (See Instructions) CENTRAL TEXAS ARCHAEOLOGICAL RESOURCES
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER-PEARSON, KATHERINE <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ARCHAEOLOGIST		Employer (See Instructions) CENTRAL TEXAS ARCHAEOLOGICAL RESOURCES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4201/4629 Rpt: 4204/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TUROFF, STEFFEN <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90048	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CITY PLANNING CONSULTANT		9 Employer (See Instructions) WALKER
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, JAMES <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SOLID GEAR
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, JAMES <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$63.00
Principal occupation / Job title (See Instructions) TELECOMMUNICATIONS ENGINEER		Employer (See Instructions) SOLID GEAR
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, KAREN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURPIN, KAREN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4202/4629 Rpt: 4205/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURRIFF, LINDA <hr/> 6 Contributor address; City; State; Zip Code DE PERE, WI 54115	7 Amount of Contribution (\$) \$15.50
8 Principal occupation / Job title (See Instructions) RECEPTIONIST		9 Employer (See Instructions) EXECUTIVE OFFICE SUITES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURRIFF, LINDA <hr/> Contributor address; City; State; Zip Code DE PERE, WI 54115	Amount of Contribution (\$) \$10.50
Principal occupation / Job title (See Instructions) RECEPTIONIST		Employer (See Instructions) EXECUTIVE OFFICE SUITES
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TWEED, JEFFREY <hr/> Contributor address; City; State; Zip Code HEWITT, TX 76643	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TWIDWELL, BUNNIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78766	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYBOUT, ALICE <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4203/4629 Rpt: 4206/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, ELLA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77056	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) ELLA TYLER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, ELLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) ELLA TYLER
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, TERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYRER, PATRICIA <hr/> Contributor address; City; State; Zip Code CANYON, TX 79015	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) WTAMU
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYRSECK, BRIAN <hr/> Contributor address; City; State; Zip Code STAMFORD, CT 06903	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) NBCUNIVERSAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4204/4629 Rpt: 4207/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TZAPERAS, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) DATA ENGINEER		9 Employer (See Instructions) CIVITAS LEARNING
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UBICO, JEAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UCCI, DEBRA <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UDASHEN, GARY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGARTE, OSCAR <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) DEPUTY CONSTABLE		Employer (See Instructions) EL PASO COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4205/4629 Rpt: 4208/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGARTE, OSCAR <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) DEPUTY CONSTABLE		9 Employer (See Instructions) EL PASO COUNTY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGWU, ADAEZE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROSEWOOD FAMILY ADVISORS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGWU, ADAEZE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROSEWOOD FAMILY ADVISORS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGWU, ADAEZE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROSEWOOD FAMILY ADVISORS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGWU, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4206/4629 Rpt: 4209/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGWU, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77062	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HIGHER EDUCATION		9 Employer (See Instructions) HOUSTON COMMUNITY COLLEGE
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UGWU, PATRICIA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UHL, AMY <hr/> Contributor address; City; State; Zip Code SAVANNAH, GA 31410	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PET CARE PROFESSIONAL		Employer (See Instructions) POOCHES & PAWS PETCARE, LLC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UHLER, TOM <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JOURNALIST		Employer (See Instructions) FORT WORTH STAR-TELEGRAM
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UJKA, BARBARA <hr/> Contributor address; City; State; Zip Code LIBERTY, MO 64068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4207/4629 Rpt: 4210/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULANDAY, HOLLY <hr/> 6 Contributor address; City; State; Zip Code CYPRESS, TX 77433	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SOCIAL MEDIA MANAGER		9 Employer (See Instructions) RAZOR RANK
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULBRICH, SARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYSIS		Employer (See Instructions) STATE OF TEXAS
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULBRICH, SARA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYSIS		Employer (See Instructions) STATE OF TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULETT, ANN <hr/> Contributor address; City; State; Zip Code HARTVILLE, MO 65667	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULLRICH, DAVID <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60657	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4208/4629 Rpt: 4211/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULLRICH, DAVID <hr/> 6 Contributor address; City; State; Zip Code FRIENDSHIP, WI 53934	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULLRICH, DAVID <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULMER, GREGORY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BAKERHOSTETLER LLP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULMER, TEDRA <hr/> Contributor address; City; State; Zip Code BRADY, TX 76825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULMER, TEDRA <hr/> Contributor address; City; State; Zip Code BRADY, TX 76825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4209/4629 Rpt: 4212/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ULRICKSON, SUSAN <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98148	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UMAR, SABA <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407-2632	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CASE MANAGER		Employer (See Instructions) FORT BEND
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNDERHILL, JOANNE <hr/> Contributor address; City; State; Zip Code GREENWOOD VILLAGE, CO 80111	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) UNDERHILL LAW, PC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNDERHILL, JOANNE <hr/> Contributor address; City; State; Zip Code GREENWOOD VILLAGE, CO 80111	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) UNDERHILL LAW, PC
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNDERWOOD, HAROLD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) TRILOGY ENGINEERING SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4210/4629 Rpt: 4213/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNGACTA, JANET <hr/> 6 Contributor address; City; State; Zip Code DEL VALLE, TX 78617	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNGER, HILARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) UNGER & HERSHKOWITZ, P.C.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNGER, HILARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) UNGER & HERSHKOWITZ, P.C.
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNGER, HILARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) UNGER & HERSHKOWITZ, P.C.
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNGER, HILARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) UNGER & HERSHKOWITZ, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4211/4629 Rpt: 4214/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNGER, HILARY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77079		
8 Principal occupation / Job title (See Instructions) JUDGE 248TH DIST CT.		9 Employer (See Instructions) TEXAS
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNION, RACHEL	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) STATE OF TEXAS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UPPLING, CHERYL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BONSALL, CA 92003		
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UPSHAW, GARTH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PORTLAND, OR 97214		
Principal occupation / Job title (See Instructions) SOFTWARE CONSULTANT		Employer (See Instructions) GARTHS KIDSTUFF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URBAN, DAVID	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98121		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4212/4629 Rpt: 4215/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URBANOWICZ, WENDY <hr/> 6 Contributor address; City; State; Zip Code VANCOUVER, WA 98668	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URBIN, SALUSTRA <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BIOMEDICAL SCIENTIST		Employer (See Instructions) LAWRENCE LIVERMORE LAB
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URBIN, SALUSTRA <hr/> Contributor address; City; State; Zip Code BRENTWOOD, CA 94513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BIOMEDICAL SCIENTIST		Employer (See Instructions) LAWRENCE LIVERMORE LAB
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URETA, JOHN <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIAS, VIOLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4213/4629 Rpt: 4216/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIAS, VIOLA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIAS, VIOLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIAS, VIOLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIAS, VIOLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIAS, VIOLA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4214/4629 Rpt: 4217/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URIBE, JUAN <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79913	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) TEAM JUAN URIBE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) URRUTIA, SUSAN <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USSHER, BRIAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTSET, MANUEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$25.03
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF ILLINOIS AT CHICAGO
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTSET, MANUEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$25.16
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF ILLINOIS AT CHICAGO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4215/4629 Rpt: 4218/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTSET, MANUEL <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60615	7 Amount of Contribution (\$) \$25.16
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) UNIVERSITY OF ILLINOIS AT CHICAGO
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTSET, MANUEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$25.03
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF ILLINOIS AT CHICAGO
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTSET, MANUEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$25.16
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF ILLINOIS AT CHICAGO
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTSET, MANUEL <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$25.03
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF ILLINOIS AT CHICAGO
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTTLEY, MEREDITH <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4216/4629 Rpt: 4219/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTTLEY, MEREDITH <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, SC 29615	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTTLEY, MEREDITH <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTTLEY, MEREDITH <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UTTLEY, MEREDITH <hr/> Contributor address; City; State; Zip Code GREENVILLE, SC 29615	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VACLAV, JERRY <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4217/4629 Rpt: 4220/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VACLAV, JERRY <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VACLAV, JERRY <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VADEN-GOAD, LINDA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-4453	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VADGAMA, SHEHNAZ <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAELO, DEBRA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4218/4629 Rpt: 4221/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDES, MARISA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75238	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) REGISTERED NURSE		9 Employer (See Instructions) BAYLOR SCOTT & WHITE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDES, ROSALINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78223	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDES, ROSALINDA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78223	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, DORA A <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) D.A.V.
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, DORA A <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) D.A.V.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4219/4629 Rpt: 4222/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, DORA A <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) D.A.V.
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, ILSA <hr/> Contributor address; City; State; Zip Code BUDA, TX 78610	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, JERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78711	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, JERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78711	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, JERRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78711	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4220/4629 Rpt: 4223/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, JESUS <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79922	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) N/A
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, JESUS <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79922	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, RAYMOND <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006-2914	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, ROSA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) COMPLIANCE OFFICER		Employer (See Instructions) US DEPT. OF LABOR
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALDEZ, ROSA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMPLIANCE OFFICER		Employer (See Instructions) US DEPT. OF LABOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4221/4629 Rpt: 4224/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTI, ANNA <hr/> 6 Contributor address; City; State; Zip Code SURPRISE, AZ 85388	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) SELF-EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTI, ANNA <hr/> Contributor address; City; State; Zip Code SURPRISE, AZ 85388	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF-EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTINE, ALAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTINE, ALAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTINE, ALEXANDRIA <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28203	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) CONTRACT WORK		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4222/4629 Rpt: 4225/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTINE, ALEXANDRIA <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28203	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CONTRACT WORK		9 Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENTINO, GUY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) TOYOTA
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALENZUELA, ANGELA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704-4540	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UNIVERSITY OF TEXAS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLE, TIFFANY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR COORDINATOR		Employer (See Instructions) HOUSTON METHODIST HOSPITAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLEJOS, EDUARDO <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60660-3838	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4223/4629 Rpt: 4226/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLEJOS, EDUARDO <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60660-3838	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLOT, COLETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALLOT, COLETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALOIR, TAMSEN <hr/> Contributor address; City; State; Zip Code ALVIN, TX 77511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) BOULWARE & VALOIR
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VALRIE, CALVIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77040	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) BAR OWNER		Employer (See Instructions) THE TIPSY LOUNGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4224/4629 Rpt: 4227/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN ANTWERP, CYNTHIA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76710	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN BUSKIRK, JEANINE <hr/> Contributor address; City; State; Zip Code BATON ROUGE, LA 70810-0767	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN CLEVE, JUDY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PR CONSULTANT		Employer (See Instructions) VAN CLEVE-HOUSTON PR
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN CLEVE, JUDY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PR CONSULTANT		Employer (See Instructions) VAN CLEVE-HOUSTON PR
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DAM, DENISE <hr/> Contributor address; City; State; Zip Code ANCHORAGE, AK 99502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4225/4629 Rpt: 4228/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DE ROSTYNE, JULIA <hr/> 6 Contributor address; City; State; Zip Code LOUISVILLE, KY 40205	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DE WEGE, HARLEY <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CO 80227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DEN BENT, JERRE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$15,000.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) THERAPY 2000
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DEN BENT, JERRE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) THERAPY 2000
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN DEN BENT, JERRE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) THERAPY 2000

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4226/4629 Rpt: 4229/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN GELDER, DIANE <hr/> 6 Contributor address; City; State; Zip Code WATAUGA, TX 76148	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN GELDER, DIANE <hr/> Contributor address; City; State; Zip Code WATAUGA, TX 76148	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN GELDER, DIANE <hr/> Contributor address; City; State; Zip Code WATAUGA, TX 76148	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN HOOSER, PHILIP <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28205	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN HOOSER, PHILIP <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4227/4629 Rpt: 4230/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN HOOSER, PHILIP <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28205	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN HORN, GREGORY <hr/> Contributor address; City; State; Zip Code WILLOWBROOK, IL 60527	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PRODUCTION DESIGNER		Employer (See Instructions) NBC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN ROEKEL, TERESA <hr/> Contributor address; City; State; Zip Code PLANO, IA 52581	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CLERK		Employer (See Instructions) USPS
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN SLYKE, GLEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN SLYKE, GLEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4228/4629 Rpt: 4231/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN SLYKE, GLEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN SLYKE, GLEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN STONE, LISA <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN STONE, LISA <hr/> Contributor address; City; State; Zip Code SUNNYVALE, CA 94087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN STONE, MARK <hr/> Contributor address; City; State; Zip Code IMPERIAL BEACH, CA 91932	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PERFESSER		Employer (See Instructions) SWCCD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4229/4629 Rpt: 4232/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN STONE, MARK <hr/> 6 Contributor address; City; State; Zip Code IMPERIAL BEACH, CA 91932	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) PERFESSER		9 Employer (See Instructions) SWCCD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN WYK, ROBERT <hr/> Contributor address; City; State; Zip Code DORSET, OH 44032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANASSE, CAROLINE <hr/> Contributor address; City; State; Zip Code BOSTON, MA 02132	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TRANSPORTATION PLANNER		Employer (See Instructions) MASSDOT
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, BETTY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, BETTY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4230/4629 Rpt: 4233/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, CONNIE <hr/> 6 Contributor address; City; State; Zip Code BLOOMFIELD, IN 47424	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, DAVID <hr/> Contributor address; City; State; Zip Code MINNEAPOLIS, NC 28652	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, MARY <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANCE, MICHAEL <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34108	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDAGRIFF, JUDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77062-2921	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4231/4629 Rpt: 4234/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDAGRIFF, JUDY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77062-2921		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDAGRIFF, JUDY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77062-2921		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDER STRATEN, DAVID	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UT AUSTIN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDER WALL, KATHLEEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code GARDNERVILLE, NV 89410		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERDOES, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MARANA, AZ 85658		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4232/4629 Rpt: 4235/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERDOES, JAMES <hr/> 6 Contributor address; City; State; Zip Code MARANA, AZ 85658	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERGRIFF, NICKY <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONTENT DEVELOPER		Employer (See Instructions) BENCHMARK EDUCATION
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHIDER, FRANCES <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHIDER, FRANCES <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4233/4629 Rpt: 4236/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4234/4629 Rpt: 4237/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> 6 Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4235/4629 Rpt: 4238/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERHOEK, EDITH <hr/> 6 Contributor address; City; State; Zip Code JACKSONVILLE, FL 32224	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERPOL, NICOLE <hr/> Contributor address; City; State; Zip Code WALTHAM, MA 02452	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERSLICE, SHERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERSLICE, SHERRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERVENNET, WILLIAM <hr/> Contributor address; City; State; Zip Code SAN MATEO, CA 94403	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4236/4629 Rpt: 4239/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERWEIT, CHRIS <hr/> 6 Contributor address; City; State; Zip Code LAKE HAVASU CITY, AZ 86403	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDEVENDER, NANCY <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDEVENDER, NANCY <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANE, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) HUSCH BLACKWELL STRATEGIES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANEN, JONATHAN <hr/> Contributor address; City; State; Zip Code PUYALLUP, WA 98372	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4237/4629 Rpt: 4240/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANETTEN, RUTH <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHOLLEBEKE, CS <hr/> Contributor address; City; State; Zip Code EARLY, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHOLLEBEKE, CS <hr/> Contributor address; City; State; Zip Code EARLY, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHOLLEBEKE, CS <hr/> Contributor address; City; State; Zip Code EARLY, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHOLLEBEKE, CS <hr/> Contributor address; City; State; Zip Code EARLY, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4238/4629 Rpt: 4241/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHOOSE, RUSSELL <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PROPERTY MANAGER		9 Employer (See Instructions) PROS PM
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHOOSE, RUSSELL <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) PROS PM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHORN JR, WILLIAM <hr/> Contributor address; City; State; Zip Code PIPERSVILLE, PA 18947	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHORN JR, WILLIAM <hr/> Contributor address; City; State; Zip Code PIPERSVILLE, PA 18947	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHORN JR, WILLIAM <hr/> Contributor address; City; State; Zip Code PIPERSVILLE, PA 18947	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4239/4629 Rpt: 4242/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANHORN JR, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code PIPERSVILLE, PA 18947	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) N/A
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANN, BRANDON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PM		Employer (See Instructions) APPLE INC.
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANNATTER, CARL <hr/> Contributor address; City; State; Zip Code MILAN, MI 48160	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANOVER, JOYCE <hr/> Contributor address; City; State; Zip Code ABINGDON, VA 24211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANRIJT, JUDITH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78733-5731	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4240/4629 Rpt: 4243/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANSANT, MARTHA <hr/> 6 Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANSANT, MARTHA <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANSANT, MARTHA <hr/> Contributor address; City; State; Zip Code SMITHVILLE, TX 78957	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANTRAN, TIMOTHY <hr/> Contributor address; City; State; Zip Code WILLIAMSBURG, VA 23188	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANTUYL, TAMARA <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4241/4629 Rpt: 4244/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANTUYL, TAMARA <hr/> 6 Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANTUYL, TAMARA <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANVOORHIS, JILL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$650.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) STRATECOM ADVISORS, LLC
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARA, LONNIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77089	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARANASI, RAVI <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE MANAGER		Employer (See Instructions) INVITATION HOMES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4242/4629 Rpt: 4245/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARANASI, RAVI	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code RICHARDSON, TX 75082		
8 Principal occupation / Job title (See Instructions) SOFTWARE MANAGER		9 Employer (See Instructions) INVITATION HOMES
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARELA, JACKY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) TEXAS HEALTH & HUMAN SERVICES COMMISSION
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) TEXAS HEALTH & HUMAN SERVICES COMMISSION
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code EL PASO, TX 79930		
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) TEXAS HEALTH & HUMAN SERVICES COMMISSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4243/4629 Rpt: 4246/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79930	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) ADVISOR		9 Employer (See Instructions) HHSC
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) TEXAS HEALTH & HUMAN SERVICES COMMISSION
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) TEXAS HEALTH & HUMAN SERVICES COMMISSION
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, CHRISTINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) TEXAS HEALTH & HUMAN SERVICES COMMISSION
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, KATRINA <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4244/4629 Rpt: 4247/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, VITO	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code CONROE, TX 77306		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARGAS, VITO	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code CONROE, TX 77306		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARLEY, JOHN	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code TUCSON, AZ 85711-2807		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) UNEMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VARNER, ARTINA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DESOTO, TX 75115		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RED OAK ISD
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASAN, ASHWIN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SUGAR LAND, TX 77478		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4245/4629 Rpt: 4248/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASAN, ASHWIN <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASELAKOS, PAT <hr/> Contributor address; City; State; Zip Code BLOOMING GROVE, TX 76626	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASFARET, GORDON <hr/> Contributor address; City; State; Zip Code PRESCOTT, AZ 86305	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER/OWNER		Employer (See Instructions) GV ENTERPRISES.COM
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASILIA, GERI <hr/> Contributor address; City; State; Zip Code GRANTS PASS, OR 97526	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASILIA, GERI <hr/> Contributor address; City; State; Zip Code GRANTS PASS, OR 97526	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4246/4629 Rpt: 4249/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASIOGAMBROS, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON HEIGHTS, IL 60005-3862	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, CELINA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION		Employer (See Instructions) UT ARLINGTON
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, CELINA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION		Employer (See Instructions) UT ARLINGTON
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, CELINA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HIGHER EDUCATION		Employer (See Instructions) UT ARLINGTON
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, GUILLERMO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4247/4629 Rpt: 4250/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, GUILLERMO <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, JOHN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, MELBA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, NELDA <hr/> Contributor address; City; State; Zip Code DEL RIO, TX 78840	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, NICOLE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78204	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) MANAGING CO-DIRECTOR		Employer (See Instructions) SAY SI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4248/4629 Rpt: 4251/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, YVONNE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASQUEZ, YVONNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78250	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASSE, EMMA <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASSE, EMMA <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASTA, BEVERLY <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4249/4629 Rpt: 4252/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VASTA, BEVERLY <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, DAVID <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMPUTER TECH		Employer (See Instructions) SELF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, DAVID <hr/> Contributor address; City; State; Zip Code HILLSBORO, TX 76645	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMPUTER TECH		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, DAYLIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, DAYLIA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4250/4629 Rpt: 4253/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, DAYLIA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, MSI, DAVID <hr/> Contributor address; City; State; Zip Code MAHOPAC, NY 10541	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) IT SUPPORT		Employer (See Instructions) MICRONET SOLUTIONS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, MSI, DAVID <hr/> Contributor address; City; State; Zip Code MAHOPAC, NY 10541	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT SUPPORT		Employer (See Instructions) MICRONET SOLUTIONS
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, PATRICIA <hr/> Contributor address; City; State; Zip Code BUCKEYE, AZ 85396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) VAN CAMP AND LEONARD
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, PATRICIA <hr/> Contributor address; City; State; Zip Code BUCKEYE, AZ 85396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LEGAL ASSISTANT		Employer (See Instructions) VAN CAMP AND LEONARD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4251/4629 Rpt: 4254/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code YANTIS, TX 75497	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, PATRICIA <hr/> Contributor address; City; State; Zip Code YANTIS, TX 75497	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHAN, PATRICIA <hr/> Contributor address; City; State; Zip Code YANTIS, TX 75497	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, DIANA <hr/> Contributor address; City; State; Zip Code CARROLLTON, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) FINANCE DIRECTOR		Employer (See Instructions) CITY OF CARROLLTON
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, HARLAN <hr/> Contributor address; City; State; Zip Code GERMANTOWN, TN 38138	Amount of Contribution (\$) \$10.70
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) BANKRATE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4252/4629 Rpt: 4255/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, JOANNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78702	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, JOANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, LYNDA <hr/> Contributor address; City; State; Zip Code BACLIFF, TX 77518	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, MICHAEL <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CONSTRUCTION		Employer (See Instructions) AQUA ARTISTS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAVRO, RICK <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78645	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) AUSTIN UNDERGROUND

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4253/4629 Rpt: 4256/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAZQUEZ, ANGEL <hr/> 6 Contributor address; City; State; Zip Code NATICK, MA 01760	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CLUBHOUSE MANAGER		9 Employer (See Instructions) SB
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAZQUEZ, VIOLETA <hr/> Contributor address; City; State; Zip Code SPRING, TX 77373	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM DIRECTOR		Employer (See Instructions) HOUSTON COMMUNITY COLLEGE
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAZQUEZ JR., ARMANDO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEAL, JARED <hr/> Contributor address; City; State; Zip Code ADDIS, LA 70710	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEAL, JARED <hr/> Contributor address; City; State; Zip Code ADDIS, LA 70710	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4254/4629 Rpt: 4257/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEALE, DAVID <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEAZEY, REBECCA <hr/> Contributor address; City; State; Zip Code PORT ARTHUR, TX 77642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELA, GLORIA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) DEF-LOGIX
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELA RICE, SUSAN <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AGENCY		Employer (See Instructions) TWDB
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELASQUEZ, SERGIO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) GRANT WRITER		Employer (See Instructions) SAFB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4255/4629 Rpt: 4258/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELEZ, JOSE A. <hr/> 6 Contributor address; City; State; Zip Code GONZALES, LA 70737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELING, GRETCHEN <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) BCRC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELLA, PAUL <hr/> Contributor address; City; State; Zip Code DELAND, FL 32724	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VELNICH, DOREEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEMULAPALLI, RAMACHANDRA <hr/> Contributor address; City; State; Zip Code PLYMOUTH, MN 55446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRODUCTION SUPERVISOR		Employer (See Instructions) COLLINS AEROSPACE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4256/4629 Rpt: 4259/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEMULAPALLI, RAMACHANDRA <hr/> 6 Contributor address; City; State; Zip Code PLYMOUTH, MN 55446	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) PRODUCTION SUPERVISOR		9 Employer (See Instructions) COLLINS AEROSPACE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEMULAPALLI, RAMACHANDRA <hr/> Contributor address; City; State; Zip Code PLYMOUTH, MN 55446	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRODUCTION SUPERVISOR		Employer (See Instructions) COLLINS AEROSPACE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENCE, MIMI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENCILL, TONY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SECURITY ENGINEER		Employer (See Instructions) ORACLE
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENCILL, TONY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SECURITY ENGINEER		Employer (See Instructions) ORACLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4257/4629 Rpt: 4260/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENDER, CECILIA <hr/> 6 Contributor address; City; State; Zip Code ESCONDIDO, CA 92027	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENDRIGER, BOBBI <hr/> Contributor address; City; State; Zip Code TEL AVIV, DC 20000	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENKATARAMAN, RAJ <hr/> Contributor address; City; State; Zip Code PROVIDENCE, RI 02905	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENKATARAMANI, HARISH <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ELECTRONICS ENGINEER		Employer (See Instructions) INTEL CORPORATION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENNERBERG II, VAUGHN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4258/4629 Rpt: 4261/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VENUTI, KATIE <hr/> 6 Contributor address; City; State; Zip Code LEANDER, TX 78641	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERA, FONDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERA, FONDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERA, FONDA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERDUZCO, LORI <hr/> Contributor address; City; State; Zip Code HARLINGEN, TX 78552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL COUNSELOR		Employer (See Instructions) SBCISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4259/4629 Rpt: 4262/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERDUZCO, LORI <hr/> 6 Contributor address; City; State; Zip Code HARLINGEN, TX 78552	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SCHOOL COUNSELOR		9 Employer (See Instructions) SBCISD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEREEN, GLENN <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERHAAR, JEAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERMA, ARCHANA <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERMA, KRISHAN <hr/> Contributor address; City; State; Zip Code BAYTOWN, TX 77523-5676	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MARINE SURVEYOR		Employer (See Instructions) MARITIME ADMINISTRATION, USDOT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4260/4629 Rpt: 4263/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4261/4629 Rpt: 4264/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NONE
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERNON, FRANCES	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WICHITA FALLS, TX 76308		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERONDA, RONALD	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FLUSHING, MI 48433		
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) THE CHILDREN OF THE UNITED STATES
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERRETT, LIANNA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4262/4629 Rpt: 4265/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERRETT, LIANNA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERRY, PAMELA <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PARALEGAL		Employer (See Instructions) NIELSEN LAW
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERSCOYLE, STEPHEN <hr/> Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) CMC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERTEL, BARBARA <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERTEL, BARBARA <hr/> Contributor address; City; State; Zip Code DEERFIELD, IL 60015	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4263/4629 Rpt: 4266/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERTNER, TERESA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code RICHMOND, VA 23229		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERTREES, STEPHANIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR SCOTT AND WHITE
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERTREES, STEPHANIE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78727		
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) BAYLOR SCOTT AND WHITE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESCIA, CHRISTIAN	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code SAN CARLOS, CA 94070		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESEL, BARBARA	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code DULUTH, MN 55812		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4264/4629 Rpt: 4267/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESEL, BARBARA <hr/> 6 Contributor address; City; State; Zip Code DULUTH, MN 55812	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESELKA, LARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) STEPTOE LLP
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESELKA, LARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) STEPTOE LLP
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESELKA, LARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) STEPTOE LLP
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESELKA, LARRY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SMYSER KAPLAN & VESELKA LLP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4265/4629 Rpt: 4268/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESSINY, ROBERT <hr/> 6 Contributor address; City; State; Zip Code CARLSBAD, CA 92010	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) INSURANCE BROKER		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VEST, KAREN <hr/> Contributor address; City; State; Zip Code AUSTINN, TX 78717	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) DATA ANALYST		Employer (See Instructions) HMS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESTAL, BETTY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UNIVERSITY HEALTH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VESTAL, HOWARD <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICE-MURRAY, SANDRA <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64111	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICE-MURRAY, SANDRA <hr/> 6 Contributor address; City; State; Zip Code KANSAS CITY, MO 64111	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICINAIZ, VICTOR <hr/> Contributor address; City; State; Zip Code PALMHURST, TX 78573	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICKERS, ADELE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) AUTONATION BOS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICTOR, PAULA <hr/> Contributor address; City; State; Zip Code BOYNTON BEACH, FL 33435	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VICZE, JULIUS <hr/> Contributor address; City; State; Zip Code WATAUGA, TX 76148-1425	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIDAL, ABRAHAM <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78705	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions) UT AUSTIN
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIDAL-KENDALL, OLIVE <hr/> Contributor address; City; State; Zip Code COLUMBUS, GA 31907	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) COLUMBUS TECHNICAL COLLEGE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIEIRA, MARGARET <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-6300	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIEIRA, MARGARET <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132-6300	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIGEN, LINDA <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4268/4629 Rpt: 4271/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIGEN, LINDA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BURLESON, TX 76028		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIGNEAULT, LORRIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code HITCHCOCK, TX 77563		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILAS, FAITH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEABROOK, TX 77586		
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) PSI
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILAS, FAITH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SEABROOK, TX 77586		
Principal occupation / Job title (See Instructions) ASTRONOMER		Employer (See Instructions) PSI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLA, CESAR	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EAGLE PASS, TX 78852		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4269/4629 Rpt: 4272/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLA, LYDIA <hr/> 6 Contributor address; City; State; Zip Code TUSTIN, CA 92782	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) CHOC
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLA, OMAR <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) EL PASO CO. HOSPITAL DISTRICT
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLA-KOMAROFF, LYDIA <hr/> Contributor address; City; State; Zip Code CHESTNUT HILL, MA 02467	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLA-KOMAROFF, LYDIA <hr/> Contributor address; City; State; Zip Code CHESTNUT HILL, MA 02467	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALOBOS, ALONDRA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROCESS ANALYST		Employer (See Instructions) ALTICE USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4270/4629 Rpt: 4273/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALOBOS, ALONDRA <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75702	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) PROCESS ANALYST		9 Employer (See Instructions) ALTICE USA
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALOBOS, ALONDRA <hr/> Contributor address; City; State; Zip Code TYLER, TX 75702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROCESS ANALYST		Employer (See Instructions) ALTICE USA
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLALON, XAVIER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLANO, ESTHER <hr/> Contributor address; City; State; Zip Code WEST PALM BEACH, FL 33407	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLANUEVA, PAMELA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) ALCUIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4271/4629 Rpt: 4274/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLANUEVA, PAMELA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75218	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) ALCUIN
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-4034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROF		Employer (See Instructions) ACC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-4034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ACC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROF		Employer (See Instructions) ACC
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ACC

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2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-4034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROF		9 Employer (See Instructions) ACC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROF		Employer (See Instructions) ACC
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ACC
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BECKY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-4034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PROF		Employer (See Instructions) ACC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, BEVERLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4273/4629 Rpt: 4276/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, CARLOS <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78754-6067	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PROGRAM SPECAILIST		9 Employer (See Instructions) STATE OF TEXAS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, CARLOS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78754-6067	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) PROGRAM SPECAILIST		Employer (See Instructions) STATE OF TEXAS
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, HELEN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, JORDAN <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHIEF OF STAFF		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, RAY <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4274/4629 Rpt: 4277/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, RAYMUNDO <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, RICARDO <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) HEALTHCARE ADMINISTRATOR		Employer (See Instructions) BROOKE ARMY MEDICAL CENTER
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, RIGOBERTO <hr/> Contributor address; City; State; Zip Code MISSION, TX 78572	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ARES SERVICES INC
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, SERGIO <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76164	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SECURITY SPECIALIST		Employer (See Instructions) NON PROFIT
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, SERGIO <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76164	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SECURITY SPECIALIST		Employer (See Instructions) NON PROFIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4275/4629 Rpt: 4278/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLARREAL, VIVIAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LMT		9 Employer (See Instructions) SELF
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLEJO, LOUISE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLERY-SAMUEL, SEAN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PROVOST UMPHREY
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILLERY-SAMUEL, SEAN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) PROVOST UMPHREY
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILVARAY, BALAJI <hr/> Contributor address; City; State; Zip Code FRISCO, TX 75034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) O9		Employer (See Instructions) DIRECTOR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4276/4629 Rpt: 4279/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILVARAY, BALAJI	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code FRISCO, TX 75034		
8 Principal occupation / Job title (See Instructions) O9		9 Employer (See Instructions) DIRECTOR
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILVARAY, BALAJI	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code FRISCO, TX 75034		
Principal occupation / Job title (See Instructions) O9		Employer (See Instructions) DIRECTOR
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, ANGELA	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code OLYMPIA, WA 98502		
Principal occupation / Job title (See Instructions) ENVIRONMENTAL PLANNER		Employer (See Instructions) WASHINGTON STATE DEPARTMENT OF ECOLOGY
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, BRENDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SPRING, TX 77379		
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) UNITED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, BRENDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SPRING, TX 77379		
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) UNITED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4277/4629 Rpt: 4280/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, EMILY <hr/> 6 Contributor address; City; State; Zip Code GIG HARBOR, WA 98335	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NURSING CARE CONSULTANT		9 Employer (See Instructions) DSHS, AL TSA, RCS (STATE OF WA)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, FLORENCE <hr/> Contributor address; City; State; Zip Code RAINIER, WA 98576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PURCHASING		Employer (See Instructions) YELM FOOD CO-OP
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, FLORENCE <hr/> Contributor address; City; State; Zip Code RAINIER, WA 98576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PURCHASING		Employer (See Instructions) YELM FOOD CO-OP
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, FLORENCE <hr/> Contributor address; City; State; Zip Code RAINIER, WA 98576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PURCHASING		Employer (See Instructions) YELM FOOD CO-OP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, LAUREL <hr/> Contributor address; City; State; Zip Code WASILLA, AK 99687	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4278/4629 Rpt: 4281/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, LAUREL <hr/> 6 Contributor address; City; State; Zip Code WASILLA, AK 99687	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, LAUREL <hr/> Contributor address; City; State; Zip Code WASILLA, AK 99687	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, LAUREL <hr/> Contributor address; City; State; Zip Code WASILLA, AK 99687	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, LAUREL <hr/> Contributor address; City; State; Zip Code WASILLA, AK 99687	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCENT, LAUREL <hr/> Contributor address; City; State; Zip Code WASILLA, AK 99687	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4279/4629 Rpt: 4282/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCI, SUSAN <hr/> 6 Contributor address; City; State; Zip Code LONG BEACH, NY 11561	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINCIK, DERRON <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) PGAL, INC.
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINES, JOE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINES, JOE <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINITSKAYA, LENA <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COUNSEL		Employer (See Instructions) PULSE BIO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4280/4629 Rpt: 4283/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINSON, BRAD <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SMITH AND VINSON LAW FIRM
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINSON, RITA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112-3113	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINSON, RITA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76112-3113	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VINSON, SHERYL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78738	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIOLA, KATY <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) KATY VIOLA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4281/4629 Rpt: 4284/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIOLA, KATY <hr/> 6 Contributor address; City; State; Zip Code WEATHERFORD, TX 76088	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) KATY VIOLA
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIOLETTO-DESPOSITO, LISA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) LISA VIOLETTO INC
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIOLETTO-DESPOSITO, LISA <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94114	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DESIGNER		Employer (See Instructions) LISA VIOLETTO INC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIRGADAMO, PATRICIA <hr/> Contributor address; City; State; Zip Code WEST HARTFORD, CT 06107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIRGEN, MATTHEW <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92126	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) MECHANICAL ENGINEER		Employer (See Instructions) GENERAL ATOMICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4282/4629 Rpt: 4285/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIRGEN, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code SAN DIEGO, CA 92126	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) MECHANICAL ENGINEER		9 Employer (See Instructions) GENERAL ATOMICS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VISSER, RHONDA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK TX ISD
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VISSER, RHONDA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ROUND ROCK TX ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VISWANATH, POOJA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) INDEED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VITAL, CARLOS <hr/> Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4283/4629 Rpt: 4286/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VITAL, VICTOR <hr/> 6 Contributor address; City; State; Zip Code DESOTO, TX 75115	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) BARNES AND THORNBURG
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIVEIROS, GEORGE <hr/> Contributor address; City; State; Zip Code NORTH KINGSTOWN, RI 02852	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) US NAVY
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIVIANO, JESSE <hr/> Contributor address; City; State; Zip Code MORRISVILLE, NC 27560-6282	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) SECURITY ANALYST		Employer (See Instructions) VERIZON BUSINESS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VLIET, DONNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOEGE, VOLKER <hr/> Contributor address; City; State; Zip Code BEAR, DE 19701-3500	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4284/4629 Rpt: 4287/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOELKER, KEVIN <hr/> 6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ASSISTANT PROFESSOR		9 Employer (See Instructions) UT HEALTH SAN ANTONIO
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOELKER, KEVIN <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) MEDTRUST STAFFING LLC
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOELKER, KEVIN <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) REGISTERED NURSE		Employer (See Instructions) MEDTRUST STAFFING LLC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGEL, GARRETT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) CORPORATE FINANCIAL CONSULTING		Employer (See Instructions) SELF
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGEL, GARRETT <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CORPORATE FINANACIAL CONSULTANT & ANGEL		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4285/4629 Rpt: 4288/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGEL, JONATHAN	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75204		
8 Principal occupation / Job title (See Instructions) DENTIST		9 Employer (See Instructions) JONATHAN VOGEL DDS PLLC
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGEL, VICKIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LA GRANGE, TX 78945		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOGEL, VICKIE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LA GRANGE, TX 78945		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOIGT, CHRISTINE J	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOIGT, CHRISTINE J	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4286/4629 Rpt: 4289/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOIGT, CHRISTINE J <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOLLER, MORTON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOLLERS, PETER <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) PILOT VALUATION LLC
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOLLERS, PETER <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BUSINESS OWNER		Employer (See Instructions) PILOT VALUATION LLC
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOLLUZ, LAURA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$43.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) PESCADOR PUBLIC STRATEGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4287/4629 Rpt: 4290/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VON BIEBERSTEIN, MARY JO <hr/> 6 Contributor address; City; State; Zip Code GHENT, NY 12075	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VONDEROHE, ROBERT <hr/> Contributor address; City; State; Zip Code DOWNERS GROVE, IL 60516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VONDEROHE, ROBERT <hr/> Contributor address; City; State; Zip Code DOWNERS GROVE, IL 60516	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VONNAHME, MARK <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VORBERG-RUGH, RACHAEL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4288/4629 Rpt: 4291/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VORBERG-RUGH, RACHAEL <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76107	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VORSANGER, DEBBIE <hr/> Contributor address; City; State; Zip Code YARDLEY, PA 19067	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VORSANGER, DEBBIE <hr/> Contributor address; City; State; Zip Code YARDLEY, PA 19067	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VORSANGER, DEBBIE <hr/> Contributor address; City; State; Zip Code YARDLEY, PA 19067	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOSO, DEBORAH <hr/> Contributor address; City; State; Zip Code SOUTHPORT, NC 28461-8373	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4289/4629 Rpt: 4292/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOSS, JOHNNY <hr/> 6 Contributor address; City; State; Zip Code ANGLETON, TX 77515	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOSS, JOHNNY <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOVK, JANE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOVK, JANE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOWELL, DR. PATRICIA <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4290/4629 Rpt: 4293/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOZZELLA, LINDA <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75074	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NURSE		9 Employer (See Instructions) MRMC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W CARPENTER, APRIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77019	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) PHYSICAL THERAPIST		Employer (See Instructions) MD ANDERSON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W DAILEY, OLLIE <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W DOWNING, THOMAS <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W HAHN, NICOLE <hr/> Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23451	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OFFICER		Employer (See Instructions) NAVY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4291/4629 Rpt: 4294/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SAN ANGELO, TX 76903		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4292/4629 Rpt: 4295/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W MULLEY, MARY <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WACHALA, MICHAEL <hr/> Contributor address; City; State; Zip Code LOWELL, MA 01852	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SAFETY OFFICER		Employer (See Instructions) AIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4293/4629 Rpt: 4296/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WACHOLDER, MYRON <hr/> 6 Contributor address; City; State; Zip Code LAGUNA BEACH, CA 92651	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WACHS, MIRIAM <hr/> Contributor address; City; State; Zip Code NEW JERSEY, NJ 07302	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) DELOITTE
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WACHS, MIRIAM <hr/> Contributor address; City; State; Zip Code NEW JERSEY, NJ 07302	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) DELOITTE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WACK, JENNIFER <hr/> Contributor address; City; State; Zip Code ROCKVILLE, MD 20851	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADA, GEORGE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4294/4629 Rpt: 4297/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADDELL, CHRISTOPHER <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75036	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HUMAN RESOURCES		9 Employer (See Instructions) NOT CURRENTLY EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADDLE, INGE <hr/> Contributor address; City; State; Zip Code VESTAVIA, AL 35243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADDLE, INGE <hr/> Contributor address; City; State; Zip Code VESTAVIA, AL 35243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADDLE, INGE <hr/> Contributor address; City; State; Zip Code VESTAVIA, AL 35243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, DOROTHY <hr/> Contributor address; City; State; Zip Code ACTON, MA 01720	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4295/4629 Rpt: 4298/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, ELISE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, ELISE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, RANDALL <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008-2543	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADE, RANDALL <hr/> Contributor address; City; State; Zip Code ALEDO, TX 76008-2543	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADHWANI, MEGNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) CORTEZ LAW FIRM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4296/4629 Rpt: 4299/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADLE, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78728	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADLE, MICHELLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADMAN, DEBBIE <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67208	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADMAN, DEBBIE <hr/> Contributor address; City; State; Zip Code WICHITA, KS 67208	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADSWORTH, NANCI <hr/> Contributor address; City; State; Zip Code NORTH PORT, FL 34289	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4297/4629 Rpt: 4300/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WADZECK, REETA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78663		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAELCHLI, MELISSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AACNS
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAELCHLI, MELISSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AACNS
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAELCHLI, MELISSA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78729		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) AACNS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGER, CHUCK	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code COLUMBUS, OH 43212		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4298/4629 Rpt: 4301/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGGY, MARK <hr/> 6 Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	7 Amount of Contribution (\$) \$17.50
8 Principal occupation / Job title (See Instructions) PHOTOGRAPHER		9 Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGGY, MARK <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, BJ <hr/> Contributor address; City; State; Zip Code CAPE MAY, NJ 08204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, BJ <hr/> Contributor address; City; State; Zip Code CAPE MAY, NJ 08204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, BJ <hr/> Contributor address; City; State; Zip Code CAPE MAY, NJ 08204	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) RUTGERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4299/4629 Rpt: 4302/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, DON <hr/> 6 Contributor address; City; State; Zip Code SAN JOSE, CA 95126	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, JAMES <hr/> Contributor address; City; State; Zip Code ELVERTA, CA 95626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAGNER, ROGER <hr/> Contributor address; City; State; Zip Code EL CAJON, CA 92021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAHL, GRETCHEN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAHL, GRETCHEN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4300/4629 Rpt: 4303/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAINWRIGHT, SANDY <hr/> 6 Contributor address; City; State; Zip Code PEWEE VALLEY, KY 40056	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAINWRIGHT, SANDY <hr/> Contributor address; City; State; Zip Code PEWEE VALLEY, KY 40056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAITE, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAITE, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-5466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAITE, BARBARA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4301/4629 Rpt: 4304/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAITE, BARBARA <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633-5466	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAITE, HENRY <hr/> Contributor address; City; State; Zip Code YELLOW SPRINGS, OH 45387	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAKE, ELIZABETH <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAKELAND, JOHN <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAKIL, SONYA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PRIVATE PRACTICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4302/4629 Rpt: 4305/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBRAN, MARK <hr/> 6 Contributor address; City; State; Zip Code OWATONNA MN, MN 55060	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) WALBRAN & FURNESS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBURN, LARRY <hr/> Contributor address; City; State; Zip Code LEESBURG, FL 34748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBURN, LARRY <hr/> Contributor address; City; State; Zip Code LEESBURG, FL 34748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALBURN, LARRY <hr/> Contributor address; City; State; Zip Code LEESBURG, FL 34748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALCH, ELIZABETH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4303/4629 Rpt: 4306/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALCH, ELIZABETH	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096-3208		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, DAVID	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77096-3208		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, ELLEN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code WYCKOFF, NJ 07481		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, JEROME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4304/4629 Rpt: 4307/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, JEROME	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77098		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, JEROME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, JEROME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, JEROME	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALD, JEROME	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4305/4629 Rpt: 4308/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDAL, DEB	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code BELLEVUE, WA 98005		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDEN, MARGARET E	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SACHSE, TX 75048		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDEN, MARGARET E	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SACHSE, TX 75048		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDEN, ROBERT	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78735		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDMAN, NANCY	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code WEST DES MOINES, IA 50266		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4306/4629 Rpt: 4309/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDRIP, STEVEN <hr/> 6 Contributor address; City; State; Zip Code APTOS, CA 95003	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) RIDHWAN FOUNDATION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDROP, TERESA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDROP, TERESA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDROP, TERESA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDROP, TERESA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4307/4629 Rpt: 4310/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDROP, TERESA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77002	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) STATE OF TEXAS
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALDROP, TERESA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) STATE OF TEXAS
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, CAROLINE <hr/> Contributor address; City; State; Zip Code RYE, NY 10580	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, CLIFF <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) SEEKER STRATEGIES
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, CYNTHIA <hr/> Contributor address; City; State; Zip Code MADISON, AL 35758	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4308/4629 Rpt: 4311/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, DONNA <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75287	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, HANNA <hr/> Contributor address; City; State; Zip Code MACOMB, IL 61455	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ATHENAHEALTH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, JILL <hr/> Contributor address; City; State; Zip Code WESTON, CT 06883	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, KWAME <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) MCGUIREWOODS
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, KWAME <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78705	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) MCGUIREWOODS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4309/4629 Rpt: 4312/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, LISA <hr/> 6 Contributor address; City; State; Zip Code MILLSAP, TX 76066	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, LISA <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, LISA <hr/> Contributor address; City; State; Zip Code MILLSAP, TX 76066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, MICKEY <hr/> Contributor address; City; State; Zip Code JOSHUA, TX 76058	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SALES REPRESENTATIVE		Employer (See Instructions) AGRI TECH ANIMAL HEALTH
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, NATHANIEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) LOBBYIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4310/4629 Rpt: 4313/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, REGGIE <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75042	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE AGEN		9 Employer (See Instructions) EXP REALTY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, REGGIE <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REAL ESTATE AGEN		Employer (See Instructions) EXP REALTY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, SEDRICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77284-2495	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, SEDRICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77284	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, SEDRICK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77284	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4311/4629 Rpt: 4314/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, SHAYNA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77051	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) HISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, TERRY <hr/> Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80909-2649	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, VICKIE <hr/> Contributor address; City; State; Zip Code BEDFORD, TX 76021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER-WALTON, TIFFANY <hr/> Contributor address; City; State; Zip Code WINDCREST, TX 78239	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) COMPLAINT ADVISOR		Employer (See Instructions) USAA
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALL, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4312/4629 Rpt: 4315/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLA, DIANA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78757		
8 Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		9 Employer (See Instructions) SELF
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLA, DIANA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, CHRIS	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code AUSTIN, TX 78757		
Principal occupation / Job title (See Instructions) PRESIDENT:CEO		Employer (See Instructions) NORTH TEXAS COMMISSION
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, HAROLD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) LOWES
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, HAROLD	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75703		
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) LOWES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4313/4629 Rpt: 4316/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, JOSHUA <hr/> 6 Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) LIBRARIAN		9 Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, JOSHUA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, JOSHUA <hr/> Contributor address; City; State; Zip Code STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) TARLETON STATE UNIVERSITY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, KATHARINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) LAKE FLATO
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, KATHARINE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) LAKE FLATO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4314/4629 Rpt: 4317/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, KRISTINE G 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, KRISTINE G Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, LINDA Contributor address; City; State; Zip Code DENTON, TX 76205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) UNT SYSTEM
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, LINDA Contributor address; City; State; Zip Code DENTON, TX 76205	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) UNT SYSTEM
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, LINN Contributor address; City; State; Zip Code NEW MEADOWS, ID 83654	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4315/4629 Rpt: 4318/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, MICHELLE <hr/> 6 Contributor address; City; State; Zip Code HURST, TX 76053	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SOCIAL WORKER		9 Employer (See Instructions) EMS ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, SANDRA <hr/> Contributor address; City; State; Zip Code NICASIO, CA 94946	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, SHANNON <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, STEVE <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) VP ENG.		Employer (See Instructions) CIQ
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, STEVE <hr/> Contributor address; City; State; Zip Code HURST, TX 76053	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) VP ENG.		Employer (See Instructions) CIQ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4316/4629 Rpt: 4319/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, TAMMI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) ENFOCUS STRATEGIES
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, TAMMI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ENFOCUS STRATEGIES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, TAMMI <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) ENFOCUS STRATEGIES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, WANDA <hr/> Contributor address; City; State; Zip Code SAN PABLO, CA 94806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MAIL CLERK		Employer (See Instructions) HOMELAND SECURITY
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, WANDA <hr/> Contributor address; City; State; Zip Code SAN PABLO, CA 94806	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MAIL CLERK		Employer (See Instructions) HOMELAND SECURITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4317/4629 Rpt: 4320/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, WANDA <hr/> 6 Contributor address; City; State; Zip Code SAN PABLO, CA 94806	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) MAIL CLERK		9 Employer (See Instructions) HOMELAND SECURITY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, WHITNEY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) UNIVERSITY
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLE, ARMANDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLE, ARMANDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77039	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLE, ARMANDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77039	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4318/4629 Rpt: 4321/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLE, ARMANDO <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77039	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		9 Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLE, ARMANDO <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77039	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) STATE REPRESENTATIVE		Employer (See Instructions) TEXAS HOUSE OF REPRESENTATIVES
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLEN, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLENSTEIN, JOSH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77077	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, BARRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4319/4629 Rpt: 4322/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, BARRY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, DOROTHY KIM <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, LACY <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, LACY <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) SELF
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, LACY <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4320/4629 Rpt: 4323/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, MARGARET <hr/> 6 Contributor address; City; State; Zip Code CLAREMONT, CA 91711	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) POMONA COLLEGE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLER, MARGARET <hr/> Contributor address; City; State; Zip Code CLAREMONT, CA 91711	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) POMONA COLLEGE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLICK, JULIE <hr/> Contributor address; City; State; Zip Code RESTON, VA 20190	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLIS, LELA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLIS, LELA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4321/4629 Rpt: 4324/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLIS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code SAN MARCOS, TX 78666	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLOCK, SHELLEY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19102-4577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) THOMAS JEFFERSON UNIVERSITY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLOCK, SHELLEY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19102-4577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) THOMAS JEFFERSON UNIVERSITY
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLOCK, SHELLEY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19102-4577	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) THOMAS JEFFERSON UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLOCK, SHELLEY <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19102-4577	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) THOMAS JEFFERSON UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4322/4629 Rpt: 4325/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLOCK, SHELLEY <hr/> 6 Contributor address; City; State; Zip Code PHILADELPHIA, PA 19102-4577	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		9 Employer (See Instructions) THOMAS JEFFERSON UNIVERSITY
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLS, JULIE <hr/> Contributor address; City; State; Zip Code NEWPORT NEWS, VA 23606	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLY, LIZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75214	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALMAN, HELEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PSYCHOTHERAPIST		Employer (See Instructions) HELEN WAKS LCSW
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALMUS, ADAM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759-7329	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4323/4629 Rpt: 4326/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSER, FREDERICK <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$37.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSER, MITZI <hr/> Contributor address; City; State; Zip Code COMFORT, TX 78013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSER, MITZI <hr/> Contributor address; City; State; Zip Code COMFORT, TX 78013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSER, MITZI <hr/> Contributor address; City; State; Zip Code COMFORT, TX 78013	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, DEE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4324/4629 Rpt: 4327/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, DEE <hr/> 6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, DEE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, DEE <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, ELIZABETH <hr/> Contributor address; City; State; Zip Code FITCHBURG, MA 01420	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CONSTITUENT SERVICES DIRECTOR		Employer (See Instructions) MASSACHUSETTS SENATE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, JAY <hr/> Contributor address; City; State; Zip Code PETALUMA, CA 94952	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4325/4629 Rpt: 4328/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, JERRY <hr/> 6 Contributor address; City; State; Zip Code OCEANSIDE, CA 92057	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, JESSICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EDUCATION MANAGER		Employer (See Instructions) JESSICA WALSH
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, JESSICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATION MANAGER		Employer (See Instructions) JESSICA WALSH
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, JESSICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATION MANAGER		Employer (See Instructions) JESSICA WALSH
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, KATHRYN <hr/> Contributor address; City; State; Zip Code NAPERVILLE, IL 60540	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OPHTHALMIC TECHNICIAN		Employer (See Instructions) GENEVA EYE CLINIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4326/4629 Rpt: 4329/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, MARGARET <hr/> 6 Contributor address; City; State; Zip Code ANN ARBOR, MI 48104	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PSYCHOLOGIST		9 Employer (See Instructions) U OF MI
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, MARGARET <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48104	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) U OF MI
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, MARGARET <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) U OF MI
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, MICHAEL <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, MICHAEL <hr/> Contributor address; City; State; Zip Code KYLE, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4327/4629 Rpt: 4330/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH, RICHARD	7 Amount of Contribution (\$) \$12.50
6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSTON, SHIRLEY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSTON, SHIRLEY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSTON, SHIRLEY	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSTON, SHIRLEY	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4328/4629 Rpt: 4331/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTER, CHRISTOPHER	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75243-6153		
8 Principal occupation / Job title (See Instructions) ALJ		9 Employer (See Instructions) TWC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, BARB	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DALLAS, TX 75252		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, BARBARA	Amount of Contribution (\$) \$6.66
Contributor address; City; State; Zip Code MADISON, WI 53719		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, LEONIE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, LEONIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N.A.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4329/4629 Rpt: 4332/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, NICOLENA <hr/> 6 Contributor address; City; State; Zip Code NEW HOPE, PA 18938	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PRODUCT OWNER		9 Employer (See Instructions) AXISPOINT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS, THERESA <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGEMENT CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS-ROGERS, TRACY <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTERS-ROGERS, TRACY <hr/> Contributor address; City; State; Zip Code LOCKHART, TX 78644	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTHER, LEONIE <hr/> Contributor address; City; State; Zip Code GRETNA, LA 70056	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4330/4629 Rpt: 4333/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTHER, SHARON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78758	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTMAN KNIGHT, LELYNNE <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTMAN KNIGHT, LELYNNE <hr/> Contributor address; City; State; Zip Code MANSFIELD, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTON, EILEEN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381-3504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTON, EILEEN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77381-3504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4331/4629 Rpt: 4334/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTON, MARK <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78717	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) BIOTECHNOLOGY		9 Employer (See Instructions) AQUABOUTY TECHNOLOGIES
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTON, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) BIOTECHNOLOGY		Employer (See Instructions) AQUABOUTY TECHNOLOGIES
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTON, POLLY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, ALBERT <hr/> Contributor address; City; State; Zip Code FREMONT, CA 94539	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) PALO ALTO FOUNDATION MEDICAL GROUP
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, FENG <hr/> Contributor address; City; State; Zip Code LOS ALTOS, CA 94022	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4332/4629 Rpt: 4335/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, PETER <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77095	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) GEOPHYSICIST		9 Employer (See Instructions) GEOCOMPUTING GROUP LLC
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, PETER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) GEOPHYSICIST		Employer (See Instructions) GEOCOMPUTING GROUP LLC
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, PETER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) ANACONDA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, VINCENT <hr/> Contributor address; City; State; Zip Code DUBLIN, OH 43016	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CHARTER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, WEIHUA <hr/> Contributor address; City; State; Zip Code NEWTON, MA 02458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4333/4629 Rpt: 4336/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, YONG <hr/> 6 Contributor address; City; State; Zip Code SHARON, MA 02067	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SWE		9 Employer (See Instructions) UST
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, YONG <hr/> Contributor address; City; State; Zip Code SHARON, MA 02067	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SWE		Employer (See Instructions) UST
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WANG, YVETTE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) WEB3 PRO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, GARRETT <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SR MANAGER		Employer (See Instructions) DISNEY STREAMING SERVICES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, KATHRYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PRODUCT MANAGEMENT		Employer (See Instructions) DELL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4334/4629 Rpt: 4337/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, LARRY <hr/> 6 Contributor address; City; State; Zip Code WHITNEY, TX 76692	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, LARRY <hr/> Contributor address; City; State; Zip Code WHITNEY, TX 76692	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, M <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, M <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$12.51
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) ASCENSION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4335/4629 Rpt: 4338/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4336/4629 Rpt: 4339/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4337/4629 Rpt: 4340/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> 6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, NATALIE <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, RICHARD <hr/> Contributor address; City; State; Zip Code LARCHMONT, NY 10538	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4338/4629 Rpt: 4341/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, VICKEY <hr/> 6 Contributor address; City; State; Zip Code HURST, TX 86054	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) INTERIOR DESIGNET		9 Employer (See Instructions) IMC
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, VICKEY <hr/> Contributor address; City; State; Zip Code HURST, TX 86054	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) INTERIOR DESIGNET		Employer (See Instructions) IMC
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDELL, DELANEY <hr/> Contributor address; City; State; Zip Code MONROE, WA 98272	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) MICROSOFT
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDELL, DELANEY <hr/> Contributor address; City; State; Zip Code MONROE, WA 98272	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) MICROSOFT
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDEN, JOHN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78753	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4339/4629 Rpt: 4342/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDER, MELISSA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) GLOBAL PROGRAM DIRECTOR		9 Employer (See Instructions) ASSA ABLOY HOSPITALITY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDER, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ACCOUNT MANAGER		Employer (See Instructions) IDEAS
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDER, MELISSA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) GLOBAL PROGRAM DIRECTOR		Employer (See Instructions) ASSA ABLOY HOSPITALITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDLAW, ANDREA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SHIPPING COORDINATOR		Employer (See Instructions) HH OIL TOOLS INC.
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDLAW, ANDREA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SHIPPING COORDINATOR		Employer (See Instructions) HH OIL TOOLS INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4340/4629 Rpt: 4343/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, JEFFERY <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76108	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) AMERICAN AIRLINES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, KAREN <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20854	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, KIMBERLY <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, LISA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, LISA <hr/> Contributor address; City; State; Zip Code LUBBOCK, TX 79413	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4341/4629 Rpt: 4344/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, LISA <hr/> 6 Contributor address; City; State; Zip Code LUBBOCK, TX 79413	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, ROBERT <hr/> Contributor address; City; State; Zip Code ASHEVILLE, NC 28805	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARE, ROBERT <hr/> Contributor address; City; State; Zip Code CANDLER, NC 28715	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAREING, BESS AND MATT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARFIELD, NANCY <hr/> Contributor address; City; State; Zip Code GREENBRAE, CA 94904-1934	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4342/4629 Rpt: 4345/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARHEIT, MELISSA <hr/> 6 Contributor address; City; State; Zip Code COLUMBUS, OH 43221	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARHOL, KAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARHOL, KAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARING, PHILLIP <hr/> Contributor address; City; State; Zip Code COTO DE CAZA, CA 92679	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNECKE, EDNA <hr/> Contributor address; City; State; Zip Code KENSINGTON, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4343/4629 Rpt: 4346/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNECKE, EDNA <hr/> 6 Contributor address; City; State; Zip Code KENSINGTON, CA 94707	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, CONNIE <hr/> Contributor address; City; State; Zip Code SEQUIM, WA 98382	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, DAVID <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, NOLAN <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75057	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS		Employer (See Instructions) WARNER TOWERS
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, NOLAN <hr/> Contributor address; City; State; Zip Code LEWISVILLE, TX 75057	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS		Employer (See Instructions) WARNER TOWERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4344/4629 Rpt: 4347/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, RICHARD	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code ARLINGTON, TX 76015		
8 Principal occupation / Job title (See Instructions) SW ENGINEER		9 Employer (See Instructions) SDS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, RICHARD	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76015		
Principal occupation / Job title (See Instructions) SW ENGINEER		Employer (See Instructions) SDS
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BELMONT, MA 02478		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER, WILLIAM	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BELMONT, MA 02478		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNER JR, FREDERIC C	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77098		
Principal occupation / Job title (See Instructions) HEALTHCARE		Employer (See Instructions) MEMORIAL HERMANN HEALTH SYSTEM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4345/4629 Rpt: 4348/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARONKER, LEONARD <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90067	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RECORD PRODUCER		9 Employer (See Instructions) WARNER RECORDS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, BARBARA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, BARBARA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, BENJAMIN & JOY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO-FINANCE/HOMEMAKER		Employer (See Instructions) ITC TRADING COMPANY LTD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, CONSTANCIA <hr/> Contributor address; City; State; Zip Code CROTON ON HUDSON, NY 10520	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4346/4629 Rpt: 4349/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, LOUISE	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code BRONX, NY 10463-2914		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, LOUISE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRONX, NY 10463-2914		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, LOUISE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BRONX, NY 10463-2914		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, LOUISE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRONX, NY 10463-2914		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, LOUISE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRONX, NY 10463-2914		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4347/4629 Rpt: 4350/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, MIKE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78212	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, PAULA <hr/> Contributor address; City; State; Zip Code BUSHKILL, PA 18324	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, PAULA <hr/> Contributor address; City; State; Zip Code BUSHKILL, PA 18324	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, REBECCA <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MIDWAY ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, REBECCA <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MIDWAY ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4348/4629 Rpt: 4351/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, REBECCA <hr/> 6 Contributor address; City; State; Zip Code WACO, TX 76712	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, REBECCA <hr/> Contributor address; City; State; Zip Code WOODWAY, TX 76712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) MIDWAY ISD
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, REBECCA <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, RICHARD <hr/> Contributor address; City; State; Zip Code BLANCO, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, WHITNEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75224-1105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) DEANS & LYONS, LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4349/4629 Rpt: 4352/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARREN, WHITNEY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75224-1105	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) DEANS & LYONS, LLP
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARSCHAUER, LYNN <hr/> Contributor address; City; State; Zip Code CHICO, CA 95928	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARDEN, KAY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, CHRIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) WACHTELL, LIPTON, ROSEN & KATZ
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, CHRIS <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10019	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		Employer (See Instructions) WACHTELL, LIPTON, ROSEN & KATZ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4350/4629 Rpt: 4353/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, JAMES <hr/> 6 Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SUPERVISOR		9 Employer (See Instructions) ALLIED UNIVERSAL
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, JAMES <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) ALLIED UNIVERSAL
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, JAMES <hr/> Contributor address; City; State; Zip Code MIDLOTHIAN, TX 76065	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SUPERVISOR		Employer (See Instructions) ALLIED UNIVERSAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, MAURICE <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, MAURICE <hr/> Contributor address; City; State; Zip Code MEXIA, TX 76667	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4351/4629 Rpt: 4354/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, SHARON <hr/> 6 Contributor address; City; State; Zip Code FPO, AE 09618	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) DOD
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, SHARON <hr/> Contributor address; City; State; Zip Code FPO, AE 09618	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DOD
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASHINGTON, SHARON <hr/> Contributor address; City; State; Zip Code FPO, AE 09618	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) DOD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASIL, JIM <hr/> Contributor address; City; State; Zip Code MERRITT ISLAND, FL 32952	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASIL, JIM <hr/> Contributor address; City; State; Zip Code MERRITT ISLAND, FL 32952	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4352/4629 Rpt: 4355/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASIL, JIM <hr/> 6 Contributor address; City; State; Zip Code MERRITT ISLAND, FL 32952	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASIL, JIM <hr/> Contributor address; City; State; Zip Code MERRITT ISLAND, FL 32952	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASINGER, CAMILLE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ENERGY DEVELOPER		Employer (See Instructions) INTERSECT POWER
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASSENICH, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCE MANAGER		Employer (See Instructions) COCA-COLA SOUTHWEST BEVERAGES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASSENICH, DAVID <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FINANCE MANAGER		Employer (See Instructions) COCA-COLA SOUTHWEST BEVERAGES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4353/4629 Rpt: 4356/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASSERMAN, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98103	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CHIROPRACTOR		9 Employer (See Instructions) SELF
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASSERMAN, MICHAEL <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CHIROPRACTOR		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WASSMUTH, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ITS		Employer (See Instructions) RRISD
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERLAND, KESHIL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) ONE BEHAVIORAL
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, JENNIFER <hr/> Contributor address; City; State; Zip Code RICHARDSON, TX 75082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PLANO ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4354/4629 Rpt: 4357/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75082	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) PLANO ISD
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, NOLAN <hr/> Contributor address; City; State; Zip Code CHESTERFIELD, VA 22838	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, DORIS <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, DORIS <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, DORIS <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TARRANT COUNTY FAMILY COURT SERVICES		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4355/4629 Rpt: 4358/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, DORIS <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76110	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, DORIS <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TARRANT COUNTY FAMILY COURT SERVICES		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, HOWARD <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, JOE B <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, JOE B <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4356/4629 Rpt: 4359/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, KURT <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75204	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) PUBLIC RELATIONS		9 Employer (See Instructions) ARENA COMMUNICATIONS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, LUCIEN <hr/> Contributor address; City; State; Zip Code ST PETERSBURG, FL 33705	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, LUCIEN <hr/> Contributor address; City; State; Zip Code ST PETERSBURG, FL 33705	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATKINS, MYRON <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75088	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) EXEC MGMT		Employer (See Instructions) MV TRANSIT
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATLING, GREGG <hr/> Contributor address; City; State; Zip Code ALLEN, TX 75013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4357/4629 Rpt: 4360/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATLING, GREGG <hr/> 6 Contributor address; City; State; Zip Code ALLEN, TX 75013	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATLINGTON, ROMULUS <hr/> Contributor address; City; State; Zip Code GREENSBORO, NC 27406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATLINGTON, ROMULUS <hr/> Contributor address; City; State; Zip Code GREENSBORO, NC 27406	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATLINGTON, ROMULUS <hr/> Contributor address; City; State; Zip Code GREENSBORO, NC 27406	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATLINGTON, ROMULUS <hr/> Contributor address; City; State; Zip Code GREENSBORO, NC 27406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4358/4629 Rpt: 4361/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, CHRISTOPHER	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code WASHINGTON, DC 20011		
8 Principal occupation / Job title (See Instructions) PUBLIC HEALTH		9 Employer (See Instructions) DC HEALTH
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, DELONIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, DELONIA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76112		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF-EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, DURWARD	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75204		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, EVELYN	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code HOUSTON, TX 77084		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4359/4629 Rpt: 4362/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, FRAN	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77035		
8 Principal occupation / Job title (See Instructions) STAFF ATTORNEY		9 Employer (See Instructions) HARRIS COUNTY
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, FRAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, FRAN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) STAFF ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, FRAN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, FRAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4360/4629 Rpt: 4363/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, GRAY	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code LEXINGTON, MA 02421		
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, GUY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code MANHATTAN, NY 10022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, JOHN	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code HOUSTON, TX 77030		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, RUTH	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code CAMARILLO, CA 93010		
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) GOLD COAST HEALTH PLAN
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, SLOAN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code OAK PARK, IL 60304		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) BULLEY & ANDREWS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4361/4629 Rpt: 4364/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, TEANA <hr/> 6 Contributor address; City; State; Zip Code STAFFORD, TX 77477	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) FORT BEND COUNTY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, WANDA J <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMMISSIONER		Employer (See Instructions) BRAZOS COUNTY
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTLES, SANDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COMMERCIAL INSURANCE UNDERWRITER		Employer (See Instructions) COLUMBIA INSURANCE GROUP
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTLES, SANDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COMMERCIAL INSURANCE UNDERWRITER		Employer (See Instructions) COLUMBIA INSURANCE GROUP
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTLES, SANDY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) COMMERCIAL INSURANCE UNDERWRITER		Employer (See Instructions) COLUMBIA INSURANCE GROUP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4362/4629 Rpt: 4365/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CAROL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CAROL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4363/4629 Rpt: 4366/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CAROL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, CRYSTAL <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) OPTUM
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, KATHRYN <hr/> Contributor address; City; State; Zip Code SIENNA, TX 77459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MARKETING COORDINATOR		Employer (See Instructions) DMD PRODUCTS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, MIKAL <hr/> Contributor address; City; State; Zip Code DORADO, DC 20000	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) WATTS LAW FIRM LLP
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, MIKAL <hr/> Contributor address; City; State; Zip Code DORADO, DC 20000	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) WATTS LAW FIRM LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4364/4629 Rpt: 4367/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, PATTI <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76207	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, PATTI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAUGH, EMILY <hr/> Contributor address; City; State; Zip Code MILWAUKIE, OR 97222	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAUGH, EMILY <hr/> Contributor address; City; State; Zip Code MILWAUKIE, OR 97222	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAXER, DAVID <hr/> Contributor address; City; State; Zip Code LIVONIA, MI 48154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PSYCHOLOGIST		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4365/4629 Rpt: 4368/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAY, MICHAEL <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) TEXAS A&M
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAY, MICHAEL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS A&M
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAY, PAUL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RECEIVING CLERK		Employer (See Instructions) COSTCO WHOLESALE CORPORATION
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAY, PAUL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RECEIVING CLERK		Employer (See Instructions) COSTCO WHOLESALE CORPORATION
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAY, PAUL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RECEIVING CLERK		Employer (See Instructions) COSTCO WHOLESALE CORPORATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4366/4629 Rpt: 4369/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYLAND, SHARON	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code WILLOW PARK, TX 76087		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYMENT, RS	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) NEISD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYNE, ELLEN T	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BRONX, NY 10471		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) BROOKLYN COLLEGE CUNY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYT, WENDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAYT, WENDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SAN ANTONIO, TX 78216		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4367/4629 Rpt: 4370/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEATHERFORD, BRUCE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) MEMBER OF TECHNICAL STAFF		9 Employer (See Instructions) AMD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEATHERLY, CINDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEATHERLY, CINDY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEATHERS, MARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEATHERSBY, ELIZABETH <hr/> Contributor address; City; State; Zip Code PILOT POINT, TX 76258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) WGI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4368/4629 Rpt: 4371/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, CLAIRE <hr/> 6 Contributor address; City; State; Zip Code SPRINGFIELD, VA 22153	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, CRAIG <hr/> Contributor address; City; State; Zip Code HILTON HEAD ISLAND, SC 29928	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, CRAIG <hr/> Contributor address; City; State; Zip Code HILTON HEAD ISLAND, SC 29928	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, DAWN <hr/> Contributor address; City; State; Zip Code SILOAM SPRINGS, AR 72761	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, DAWN <hr/> Contributor address; City; State; Zip Code SILOAM SPRINGS, AR 72761	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4369/4629 Rpt: 4372/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, MARIAN <hr/> 6 Contributor address; City; State; Zip Code BISBEE, AZ 85603-9749	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, MARIAN <hr/> Contributor address; City; State; Zip Code BISBEE, AZ 85603-9749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, MARIAN <hr/> Contributor address; City; State; Zip Code BISBEE, AZ 85603-9749	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, MARIAN <hr/> Contributor address; City; State; Zip Code BISBEE, AZ 85603-9749	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, MARIAN <hr/> Contributor address; City; State; Zip Code BISBEE, AZ 85603-9749	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4370/4629 Rpt: 4373/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER, MARIAN <hr/> 6 Contributor address; City; State; Zip Code BISBEE, AZ 85603-9749	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEAVER-RIVERS, VERONICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) MBROH ENGINEERING INC		Employer (See Instructions) MBROH ENGINEERING
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, ANN <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI TEXAS, TX 78414	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, AUDREY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS COORDINATOR		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, AUDREY <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COMMUNICATIONS COORDINATOR		Employer (See Instructions) THE UNIVERSITY OF TEXAS AT AUSTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4371/4629 Rpt: 4374/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, BARBARA <hr/> 6 Contributor address; City; State; Zip Code BURLESON, TX 76028	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, BARBARA <hr/> Contributor address; City; State; Zip Code BURLESON, TX 76028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, DEBORAH <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77802	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, ELLINGSWORTH <hr/> Contributor address; City; State; Zip Code DEKALB, IL 60115	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, ELLINGSWORTH <hr/> Contributor address; City; State; Zip Code DEKALB, IL 60115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4372/4629 Rpt: 4375/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, ELVA <hr/> 6 Contributor address; City; State; Zip Code LOCKHART, TX 78644	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, JAMES <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ESCALATION ENGINEER		Employer (See Instructions) IMPERVA, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, JAMES <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ESCALATION ENGINEER		Employer (See Instructions) IMPERVA, INC.
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, JAMES <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ESCALATION ENGINEER		Employer (See Instructions) IMPERVA, INC.
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, JAMES <hr/> Contributor address; City; State; Zip Code IRVING, TX 75060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ESCALATION ENGINEER		Employer (See Instructions) IMPERVA, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4373/4629 Rpt: 4376/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, JOE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77006	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ARCHITECT		9 Employer (See Instructions) WEBB ARCHITECTS
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4374/4629 Rpt: 4377/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> 6 Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LARRY <hr/> Contributor address; City; State; Zip Code POLLOCK PINES, CA 95726	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LESLIE <hr/> Contributor address; City; State; Zip Code CARMEL, IN 46033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4375/4629 Rpt: 4378/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LINDA <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, TX 77406	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LINDA <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, LINDA <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77406	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, SUE <hr/> Contributor address; City; State; Zip Code PARK CITY, UT 84060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) APPLE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, SUE <hr/> Contributor address; City; State; Zip Code PARK CITY, UT 84060	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) APPLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4376/4629 Rpt: 4379/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB, WHITNEY <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77379	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB-LOCKE, RASHAWN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBB-LOCKE, RASHAWN <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBBER, JOHELEN. <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBBERMAN, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4377/4629 Rpt: 4380/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBBERMAN, AMY <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78731	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBBERMAN, AMY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, CHARLOTTE <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, CHARLOTTE ANN <hr/> Contributor address; City; State; Zip Code HEIDENHEIMER, TX 76533	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, CHARLOTTE ANN <hr/> Contributor address; City; State; Zip Code HEIDENHEIMER, TX 76533	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4378/4629 Rpt: 4381/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, CHARLOTTE ANN <hr/> 6 Contributor address; City; State; Zip Code HEIDENHEIMER, TX 76533	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, JARED <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ADMIN		Employer (See Instructions) NEW YORK UNIVERSITY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, LISA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) BEAUMONT ISD
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, LISA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) BEAUMONT ISD
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, MICHAEL <hr/> Contributor address; City; State; Zip Code TERRYVILLE, NY 11776	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4379/4629 Rpt: 4382/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBER, ROBERT <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBET, CAROLE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10025	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBRE, BERNADETTE <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBRE, BERNADETTE <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBRE, BERNADETTE <hr/> Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4380/4629 Rpt: 4383/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBRE, BERNADETTE <hr/> 6 Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, CECIL <hr/> Contributor address; City; State; Zip Code CARMINE, TX 78932	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, SHEYNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING MANAGER		Employer (See Instructions) CONTINUUM ANALYTICS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, SHEYNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING MANAGER		Employer (See Instructions) CONTINUUM ANALYTICS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, SHEYNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING MANAGER		Employer (See Instructions) CONTINUUM ANALYTICS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4381/4629 Rpt: 4384/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, SHEYNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78752	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) MARKETING		9 Employer (See Instructions) FORTIVE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, SHEYNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) FORTIVE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTER, SHEYNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) FORTIVE
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBSTERLOVE, J <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) ADOBE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WECHSLER, SHERON <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78414	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4382/4629 Rpt: 4385/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEDEMEYER, JACOB <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) ESTRELLA DEL PASO
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEDEMEYER, JACOB <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ESTRELLA DEL PASO
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEED, HEATHER <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES SMB		Employer (See Instructions) APPLE INC.
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEED, MARILYN <hr/> Contributor address; City; State; Zip Code UNIVERSAL CITY, TX 78148	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEDMAN, MONICA <hr/> Contributor address; City; State; Zip Code WACO, TX 76711	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHD STUDENT		Employer (See Instructions) BAYLOR UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4383/4629 Rpt: 4386/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKES, EARL <hr/> 6 Contributor address; City; State; Zip Code FLUSHING, NY 11358	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKES, EARL <hr/> Contributor address; City; State; Zip Code FLUSHING, NY 11358	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS GRIGSBY, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROSWELL, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TRAUMA RECOVERY COACH		Employer (See Instructions) KIMBERLY WEEKS COACHING LLC.
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS GRIGSBY, KIMBERLY <hr/> Contributor address; City; State; Zip Code ROSWELL, GA 30076	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) TRAUMA RECOVERY COACH		Employer (See Instructions) KIMBERLY WEEKS COACHING LLC.
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEMS, JEFF <hr/> Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4384/4629 Rpt: 4387/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEMS, JEFF <hr/> 6 Contributor address; City; State; Zip Code WIMBERLEY, TX 78676	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEMS, MARY <hr/> Contributor address; City; State; Zip Code KATY, TX 77493	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEENING, RICHARD <hr/> Contributor address; City; State; Zip Code MARATHON, TX 79842	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PROLITEC INC.
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEENING, RICHARD <hr/> Contributor address; City; State; Zip Code MARATHON, TX 79842	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PROLITEC INC.
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEHRING, CHARLES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) RESPIRTORY CARE PRACTITIONER		Employer (See Instructions) TCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4385/4629 Rpt: 4388/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEI, MINGYUAN <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) REAL INTERNATIONAL
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIDENMAN, MEREDITH <hr/> Contributor address; City; State; Zip Code BROOKFIELD, CT 06804	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIDMANN, KIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIGHT, SHARON <hr/> Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIHS, DIANA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) CENTRAL TEXAS OB-GYN ASSOCIATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4386/4629 Rpt: 4389/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, JANE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) ANTIQUES		9 Employer (See Instructions) JANE WEIL
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, JESSE L <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, JESSE L <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, KAREN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) ARTIST AT PLAY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, KAREN <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) ARTIST AT PLAY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4387/4629 Rpt: 4390/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, MIRIAM <hr/> 6 Contributor address; City; State; Zip Code BELMONT, MA 02478	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) EHS		9 Employer (See Instructions) BOSTON CHILDREN'S HOSPITAL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, PETER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEILMANN, RENEE <hr/> Contributor address; City; State; Zip Code NEVADA CITY, CA 95959	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINAND, ROD <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINBERG, D <hr/> Contributor address; City; State; Zip Code CORNVILLE, AZ 86425	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4388/4629 Rpt: 4391/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINBERG, D <hr/> 6 Contributor address; City; State; Zip Code CORNVILLE, AZ 86425	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINBERG, D <hr/> Contributor address; City; State; Zip Code CORNVILLE, AZ 86425	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINBERG, D <hr/> Contributor address; City; State; Zip Code CORNVILLE, AZ 86425	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINBERG, D <hr/> Contributor address; City; State; Zip Code CORNVILLE, AZ 86425	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINE, KIM <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SALES ENABLEMENT		Employer (See Instructions) VMWARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4389/4629 Rpt: 4392/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINER, MICHAEL	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINER, MICHAEL	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75070		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINER, SANFORD	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINERT, DOUGLAS	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code SAN ANGELO, TX 76901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINERT, DOUGLAS	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code SAN ANGELO, TX 76901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4390/4629 Rpt: 4393/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINGARTEN, MERRI <hr/> 6 Contributor address; City; State; Zip Code NEW YORK, NY 10021	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) CLINICAL PSYCHOLOGIST		9 Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINGARTEN, MERRI <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10021	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CLINICAL PSYCHOLOGIST		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSETIN, SANDRA <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MARKETING		Employer (See Instructions) ATT
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSETIN, SANDRA <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MARKETING		Employer (See Instructions) ATT
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSETIN, SANDRA <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MARKETING		Employer (See Instructions) ATT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4391/4629 Rpt: 4394/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSETIN, SANDRA <hr/> 6 Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRODUCT MARKETING		9 Employer (See Instructions) ATT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSTEIN, ELIOT <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60615	Amount of Contribution (\$) \$524.00
Principal occupation / Job title (See Instructions) GRADUATE STUDENT		Employer (See Instructions) UNIVERSITY OF CHICAGO
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSTEIN, HILARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) INDEPENDENT
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSTEIN, HILARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) INDEPENDENT
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSTEIN, HILARY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) INDEPENDENT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4392/4629 Rpt: 4395/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINSTEIN, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55403	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINTRAUB, STEVEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) EXPEDIA.COM
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINTRAUB, STEVEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) EXPEDIA.COM
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEINTRAUB, STEVEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) EXPEDIA.COM
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIR, ANDREW <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78218	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4393/4629 Rpt: 4396/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIS, ALISON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78753	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) RECRUITER		9 Employer (See Instructions) ALISON WEIS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIS, CARL <hr/> Contributor address; City; State; Zip Code BREWSTER, MA 02631	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIS, JODI <hr/> Contributor address; City; State; Zip Code ATHOL, ID 83801	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MAILCARRIER		Employer (See Instructions) USPS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISMAN, CAROLL <hr/> Contributor address; City; State; Zip Code WAXAHACHIE, TX 75167	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, DOUG <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) SHUTTERFLU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4394/4629 Rpt: 4397/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, DOUGLAS	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691		
8 Principal occupation / Job title (See Instructions) MANAGEMENT		9 Employer (See Instructions) SHUTTERFLY
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, DOUGLAS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78691		
Principal occupation / Job title (See Instructions) MANAGEMENT		Employer (See Instructions) SHUTTERFLY
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, EDWARD	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PALO ALTO, CA 94301		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, EDWARD	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PALO ALTO, CA 94301		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, HOWARD P	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code NEWTON, MA 02458		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4395/4629 Rpt: 4398/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, HOWARD P <hr/> 6 Contributor address; City; State; Zip Code NEWTON, MA 02458	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, JOSEPH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77041	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, KAREN <hr/> Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85254	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, MARK <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS, ROBERTA <hr/> Contributor address; City; State; Zip Code POTOMAC, MD 20854	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4396/4629 Rpt: 4399/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS-HESSLER, PAULA <hr/> 6 Contributor address; City; State; Zip Code FREELAND, WA 98249	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS-HESSLER, PAULA <hr/> Contributor address; City; State; Zip Code FREELAND, WA 98249	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISSBROD, ELLEN <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10013	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISSHAAR, PAUL <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30338	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISSMAN, DANIEL M <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10024-3733	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) FILMMAKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4397/4629 Rpt: 4400/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEITZMAN, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code MADISON, CT 06443	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) WRITER		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELBER, BRIGID <hr/> Contributor address; City; State; Zip Code MARBLEHEAD, MA 01945	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) TUFTS MEDICAL CENTER
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELBOURN, JANET <hr/> Contributor address; City; State; Zip Code MENIFEE, CA 92584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELBOURN, JANET <hr/> Contributor address; City; State; Zip Code MENIFEE, CA 92584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, DONALD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4398/4629 Rpt: 4401/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, JANNA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78737	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PHYSICIAN		9 Employer (See Instructions) USACS
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, JANNA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) USACS
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, JULEY <hr/> Contributor address; City; State; Zip Code FAIRVIEW, TX 75069	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, LINDA <hr/> Contributor address; City; State; Zip Code SUMAS, WA 98295	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, LYNN <hr/> Contributor address; City; State; Zip Code EVANSTON, IL 60201	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) KABAFUSION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4399/4629 Rpt: 4402/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, LYNN <hr/> 6 Contributor address; City; State; Zip Code EVANSTON, IL 60201	7 Amount of Contribution (\$) \$50.25
8 Principal occupation / Job title (See Instructions) PHARMACIST		9 Employer (See Instructions) KABAFUSION
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, PAMELA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOME HEALTH WORKER		Employer (See Instructions) IN HOME ATTENDANT CARE
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, PARKER <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CIVIL ENGINEER		Employer (See Instructions) CITY OF AUSTIN
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, TERRENCE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BROWN & HOFMEISTER
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, TERRENCE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) BROWN & HOFMEISTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4400/4629 Rpt: 4403/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELDON, FRANCES <hr/> 6 Contributor address; City; State; Zip Code SPARTANBURG, SC 29302	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLBORN, DEBORAH <hr/> Contributor address; City; State; Zip Code CENTER POINT, TX 78010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KSH
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLBORN, DEBORAH <hr/> Contributor address; City; State; Zip Code CENTER POINT, TX 78010	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KSH
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLBORN, DEBORAH <hr/> Contributor address; City; State; Zip Code CENTER POINT, TX 78010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KSH
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLBORN, DEBORAH <hr/> Contributor address; City; State; Zip Code CENTER POINT, TX 78010	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) KSH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4401/4629 Rpt: 4404/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLER, BRIAN <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87111	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) ALBUQUERQUE PUBLIC SCHOOLS
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLER, JEAN <hr/> Contributor address; City; State; Zip Code COLUMBIA, MD 21044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLER, VIVIEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78736	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLINGTON, PAULETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLIVER, ROBERT <hr/> Contributor address; City; State; Zip Code EAST AMHERST, NY 14051	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4402/4629 Rpt: 4405/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLMAN, THERESA <hr/> 6 Contributor address; City; State; Zip Code JEFFERSONVILLE, VT 05464	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) LAB TECHNICIAN		9 Employer (See Instructions) UNIVERSITY OF VERMONT
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, ANN <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92176	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PARAEDUCATOR		Employer (See Instructions) SDUSD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, CLINTON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, CLINTON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, DANNY <hr/> Contributor address; City; State; Zip Code WYLIE, TX 75098	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4403/4629 Rpt: 4406/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, DIANNE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, GLORIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, GLORIA <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, JERRY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, JUDY <hr/> Contributor address; City; State; Zip Code MICA, WA 99023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TAX SPECIALIST		Employer (See Instructions) STATE OF WA DEPT OF REVENUE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4404/4629 Rpt: 4407/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, MARGARET (BETSY)	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code KINGS MOUNTAIN, NC 28086-9278		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, PAMELA	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code CYPRESS, TX 77429		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELLS, RODNEY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code MISSOURI CITY, TX 77459		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELSH, JOANNE	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ABINGTON, PA 19001		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELSH, LINDA	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code AUSTIN, TX 78602		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4405/4629 Rpt: 4408/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELSH, LINDA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78602	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELTGE MD, ARLO <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELTGE MD, ARLO <hr/> Contributor address; City; State; Zip Code BELLAIRE, TX 77401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENDLAND, ADRIANA <hr/> Contributor address; City; State; Zip Code THOUSAND OAKS, CA 91362	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR DIRECTOR		Employer (See Instructions) ALBERT & MACKENZIE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENNING, SAMUEL <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4406/4629 Rpt: 4409/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENNING, SAMUEL <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75235	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENTZ, ERICA <hr/> Contributor address; City; State; Zip Code MECHANICSBURG, PA 17055	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENTZ, ERICA <hr/> Contributor address; City; State; Zip Code MECHANICSBURG, PA 17055	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENZL, CRISTINA LARA <hr/> Contributor address; City; State; Zip Code LONG BEACH, CA 90802-4937	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERBLOW, DOROTHY <hr/> Contributor address; City; State; Zip Code EUCLID, WY 44132	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4407/4629 Rpt: 4410/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERNECKE, ELLEN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CHICAGO, IL 60657		
8 Principal occupation / Job title (See Instructions) SOCIAL MEDIA MANAGER		9 Employer (See Instructions) SWING LEFT
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERNER, HEATHER	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code SAN DIEGO, CA 92103		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERNER, HEATHER	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code SAN DIEGO, CA 92103		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERNER, MK	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERNER, MK	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4408/4629 Rpt: 4411/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WERTZ, MCKIM <hr/> 6 Contributor address; City; State; Zip Code CLEVELAND, OH 44130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, EDWARD <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, EDWARD <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, PATRICIA <hr/> Contributor address; City; State; Zip Code BOOTHWYN, PA 19061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, PATRICIA <hr/> Contributor address; City; State; Zip Code BOOTHWYN, PA 19061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4409/4629 Rpt: 4412/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code BOOTHWYN, PA 19061	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, PATRICIA <hr/> Contributor address; City; State; Zip Code BOOTHWYN, PA 19061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, PATRICIA <hr/> Contributor address; City; State; Zip Code BOOTHWYN, PA 19061	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESLEY, STEPHANIE <hr/> Contributor address; City; State; Zip Code OREM, UT 84058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INSTRUCTOR		Employer (See Instructions) BYU-PATHWAY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESSMAN, MINDA <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) BISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4410/4629 Rpt: 4413/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESSON, CYNTHIA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code DRIPPING SPRINGS, TX 78620		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) WESSON
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, ANN	Amount of Contribution (\$) \$20.23
Contributor address; City; State; Zip Code SAN BRUNO, CA 94066		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CITY COLLEGE OF SF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, ANN	Amount of Contribution (\$) \$20.23
Contributor address; City; State; Zip Code SAN BRUNO, CA 94066		
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) CITY COLLEGE OF SF
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, BEN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRISCO, TX 75035		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FROST BROWN TODD LLP
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, DEBORAH	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code SHERMAN, TX 75092		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4411/4629 Rpt: 4414/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, ERIN <hr/> 6 Contributor address; City; State; Zip Code FRISCO, TX 75035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) APPRAISAL SUPPORT MANAGER		9 Employer (See Instructions) COLLIN CENTRAL APPRAISAL DISTRICT
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, JAY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COMML REAL ESTATE		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, JAY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COMML REAL ESTATE		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, JESSICA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77381-4351	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, KARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) WEST HOUSTON MEDIATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4412/4629 Rpt: 4415/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, KARLA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77002	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) MEDIATOR		9 Employer (See Instructions) WEST HOUSTON MEDIATION
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, LISA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, LISA <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, LOIS <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, MATT <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4413/4629 Rpt: 4416/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code TEMPLE, TX 76504	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, MATTHEW <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, MEGAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, RANDOLPH <hr/> Contributor address; City; State; Zip Code CHATTANOOGA, TN 37421	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, RAQUEL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) THE STATE OF TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4414/4629 Rpt: 4417/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, RAQUEL	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code BEAUMONT, TX 77704		
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) THE STATE OF TEXAS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, ROGER	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code COLORADO SPRINGS, CO 80909-2160		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, ROYCE	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code DESOTO, TX 75115		
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, RYAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code HOUSTON, TX 77018		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) COGNIZANT
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, SARA	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code SAN LUIS OBISPO, CA 93401-2938		
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) PACIFIC BUILDERS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4415/4629 Rpt: 4418/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, TRISTAN	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78728		
8 Principal occupation / Job title (See Instructions) PHARMACY TECHNICIAN		9 Employer (See Instructions) ARX
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST, WALTER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76109		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST-GREEN, NORMA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST-GREEN, NORMA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77035		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTBERG, JAMES	Amount of Contribution (\$) \$12.50
Contributor address; City; State; Zip Code SCOTTSDALE, AZ 85251		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4416/4629 Rpt: 4419/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTERGREN, KATHY <hr/> 6 Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78416	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ACADEMIC ADVISOR		9 Employer (See Instructions) DEL MAR COLLEGE
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTERGREN, KATHY <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78416	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ACADEMIC ADVISOR		Employer (See Instructions) DEL MAR COLLEGE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTIN, SHANNON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) UT MD ANDERSON CANCER CENTER
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTMORELAND, HEATHER <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRODUCT MARKETING MANAGER		Employer (See Instructions) AMPLIFY-NOW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTON, REBECCA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) UTSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4417/4629 Rpt: 4420/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTPHAL, BRENDA <hr/> 6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55419	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SALES		9 Employer (See Instructions) SALES
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WETHERBY, SHARON <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WETTERAUER, CAROL <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WETZEL, SANDRA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76244	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEXLER, MIKE <hr/> Contributor address; City; State; Zip Code MEDINA, OH 44256	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4418/4629 Rpt: 4421/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEXLER, STUART <hr/> 6 Contributor address; City; State; Zip Code EAST WINDSOR, NJ 08520	7 Amount of Contribution (\$) \$2.88
8 Principal occupation / Job title (See Instructions) RESEARCHER		9 Employer (See Instructions) CRCCRRB
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEY, KATHRYN <hr/> Contributor address; City; State; Zip Code WEATHERFORD, TX 76086	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEYMOUTH, RAE ANN <hr/> Contributor address; City; State; Zip Code ANN ARBOR, MI 48103	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEYNAND, DIANA <hr/> Contributor address; City; State; Zip Code WOODLAND HILLS, CA 91367	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) 2ND SIDE ADVENTURES, LLC
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHARTON, JEANETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4419/4629 Rpt: 4422/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHARTON, JEANETTE <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75225-2066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHARTON, JEANETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHARTON, JEANETTE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75225-2066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, JENNIFER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) RETIRED TEXAS
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, JENNIFER <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) RETIRED TEACHER		Employer (See Instructions) RETIRED TEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4420/4629 Rpt: 4423/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78233	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) RETIRED TEACHER		9 Employer (See Instructions) RETIRED TEXAS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4421/4629 Rpt: 4424/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, SUZANNE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHATLEY, SUZANNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78735	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEAT, MARY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEAT, SARAH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) PPGT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATCROFT-PARDUE, KEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4422/4629 Rpt: 4425/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATCROFT-PARDUE, KEN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76111	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATCROFT-PARDUE, KEN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76111	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, DOUG <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) ATTUNITY
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, DOUG <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$6.87
Principal occupation / Job title (See Instructions) SE		Employer (See Instructions) ATTUNITY
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, KAREN <hr/> Contributor address; City; State; Zip Code SPRING, TX 77389	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) WHEATON DETAILING SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4423/4629 Rpt: 4426/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, KAREN	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SPRING, TX 77389		
8 Principal occupation / Job title (See Instructions) OFFICE MANAGER		9 Employer (See Instructions) WHEATON DETAILING SERVICE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, M C	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, M C	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATON, M C	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, ANN	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code MAGNOLIA, TX 77355		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4424/4629 Rpt: 4427/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, CALEY	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75208		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, JANIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, JANIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ROUND ROCK, TX 78681		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, KYLIE	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code WASHINGTON, DC 20002-5419		
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) CHILDRENS FUNDING PROJECT
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, LEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76102-6354		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4425/4629 Rpt: 4428/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, RICHARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, RICHARD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, SANDI <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, SANDI <hr/> Contributor address; City; State; Zip Code SCHERTZ, TX 78154	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4426/4629 Rpt: 4429/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, TEDI <hr/> 6 Contributor address; City; State; Zip Code LOS ANGELES, CA 90043	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) NONE
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, TRICIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75218	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHIPPLE, MAX <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007-5260	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) AFFORDABLE HOUSING DEVELOPER		Employer (See Instructions) THE NRP GROUP
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHISLER, STEVEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19148	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) WHISLER CIVILIAN
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHISMAN, LAURA <hr/> Contributor address; City; State; Zip Code WACO, TX 76712	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) LICENSED PROFESSIONAL COUNSELOR		Employer (See Instructions) LAURA WHISMAN, LPC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4427/4629 Rpt: 4430/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHISTLER, BARRY <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75214	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) ART GALLERY DIRECTOR		9 Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITACRE, JOAN <hr/> Contributor address; City; State; Zip Code NYACK, NY 10960	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MOVEMENT THERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, HENRIETTA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, HENRIETTA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, HENRIETTA <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4428/4629 Rpt: 4431/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, HENRIETTA <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60628	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, LUCILLE <hr/> Contributor address; City; State; Zip Code NEWPORT, RI 02840	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, LUCILLE <hr/> Contributor address; City; State; Zip Code NEWPORT, RI 02840	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, SARAH <hr/> Contributor address; City; State; Zip Code TERRELL, TX 75160	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANDREW <hr/> Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4429/4629 Rpt: 4432/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANDREW <hr/> 6 Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANDREW <hr/> Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANDREW <hr/> Contributor address; City; State; Zip Code CHEVY CHASE, MD 20815	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PRAISE TRANSPORTATION SVC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, BETTY H <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4430/4629 Rpt: 4433/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, BETTY H <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77057	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, BETTY H <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, BOOKER <hr/> Contributor address; City; State; Zip Code TARZANA, CA 91356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) BTW PRODUCTIONS INC
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, BOOKER <hr/> Contributor address; City; State; Zip Code TARZANA, CA 91356	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) MUSICIAN		Employer (See Instructions) BTW PRODUCTIONS INC
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, CONNI <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4431/4629 Rpt: 4434/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, DAVID <hr/> 6 Contributor address; City; State; Zip Code DOUGLASVILLE, GA 30135	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DOUGLAS COUNTY BOARD OF ED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, DAWN <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354-7298	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OPTICIAN		Employer (See Instructions) BAXTER EYECARE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, EARL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC SERVICE		Employer (See Instructions) CITY
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, EARL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC SERVICE		Employer (See Instructions) CITY
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, EARL <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PUBLIC SERVICE		Employer (See Instructions) CITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4432/4629 Rpt: 4435/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, EDWARD <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98115	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, GREGORY <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, GREGORY <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, GREGORY <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, GREGORY <hr/> Contributor address; City; State; Zip Code DICKINSON, TX 77539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4433/4629 Rpt: 4436/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, GREGORY <hr/> 6 Contributor address; City; State; Zip Code DICKINSON, TX 77539	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, JON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR, NAT RES & ENV QUALITY		Employer (See Instructions) TRAVIS COUNTY TRANSPORTATION & NATURAL
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, JUDITH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, KATHLEEN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, LINDA <hr/> Contributor address; City; State; Zip Code SAN ANGELO, TX 76903	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4434/4629 Rpt: 4437/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, MARTA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, MARTA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, MICHAEL <hr/> Contributor address; City; State; Zip Code WASILLA, AK 99623	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, RANDY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75075	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, RAYMOND <hr/> Contributor address; City; State; Zip Code BOMOSEENHUBBARTON, VT 05732	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4435/4629 Rpt: 4438/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, REBECCA <hr/> 6 Contributor address; City; State; Zip Code SAN ANGELO, TX 76901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, SANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONTRACTS ADMINISTRATOR		Employer (See Instructions) SETON HEALTHCARE FAMILY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, SANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CONTRACTS ADMINISTRATOR		Employer (See Instructions) SETON HEALTHCARE FAMILY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, SANDRA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, STEVEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75235	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) INSPECTOR		Employer (See Instructions) CITY OF DALLAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4436/4629 Rpt: 4439/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, SUSAN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77069	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, SUSAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77069	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, TRACY <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SALES		Employer (See Instructions) DW HOMES
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, WANDA <hr/> Contributor address; City; State; Zip Code DUARTE, CA 91010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, WILLIE <hr/> Contributor address; City; State; Zip Code LIVINGSTON, TX 77351	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) OFFICER		Employer (See Instructions) JACK WHITE ENTERPRISES, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4437/4629 Rpt: 4440/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, WILLIE	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code LIVINGSTON, TX 77351		
8 Principal occupation / Job title (See Instructions) OFFICER		9 Employer (See Instructions) JACK WHITE ENTERPRISES, INC.
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, WILLIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code LIVINGSTON, TX 77351		
Principal occupation / Job title (See Instructions) OFFICER		Employer (See Instructions) JACK WHITE ENTERPRISES, INC.
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITED, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITED, EILEEN	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHEAD, ANDREW	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code FERNDAL, MI 48220		
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) RKT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4438/4629 Rpt: 4441/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHEAD, BRENDA	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77007		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) BRENDA WHITEHEAD
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHEAD, JACQUELINE	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code MIDDLETOWN, CT 06457		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHOUSE, LARRY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BENBROOK, TX 76116		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHOUSE, LEAH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHMOND, VA 23227		
Principal occupation / Job title (See Instructions) PROCESS MANAGER		Employer (See Instructions) CAPITAL ONE
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHOUSE, LEAH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code RICHMOND, VA 23227		
Principal occupation / Job title (See Instructions) PROCESS MANAGER		Employer (See Instructions) CAPITAL ONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4439/4629 Rpt: 4442/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITEHOUSE, LEAH <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, VA 23227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PROCESS MANAGER		9 Employer (See Instructions) CAPITAL ONE
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITELEY, DIANE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CREATIVE CONSULTANT		Employer (See Instructions) WHITELEY & WHITELEY DESIGN GROUP, INC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITELEY, DIANE <hr/> Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CREATIVE CONSULTANT		Employer (See Instructions) WHITELEY & WHITELEY DESIGN GROUP, INC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITERABBIT, HERMAN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) FINISHER		Employer (See Instructions) BOB'S COPY SHOP
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITERABBIT, HERMAN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53713	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) FINISHER		Employer (See Instructions) BOB'S COPY SHOP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4440/4629 Rpt: 4443/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITERABBIT, HERMAN <hr/> 6 Contributor address; City; State; Zip Code MADISON, WI 53713	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) FINISHER		9 Employer (See Instructions) BOB'S COPY SHOP
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITERABBIT, HERMAN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) FINISHER		Employer (See Instructions) BOB'S COPY SHOP
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITERABBIT, HERMAN <hr/> Contributor address; City; State; Zip Code MADISON, WI 53713	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) FINISHER		Employer (See Instructions) BOB'S COPY SHOP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITESELL, SUMMER <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98125	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) OFFICE ASSISTANT		Employer (See Instructions) SEATTLE DEPOSITION REPORTERS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITETREE, AMY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) UT HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4441/4629 Rpt: 4444/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITFIELD, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITFIELD, DEBORAH <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITFIELD, JEFF <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KELLY HART & HALLMAN
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITFIELD, JEFF <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) KELLY HART & HALLMAN
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY, CAROLINE <hr/> Contributor address; City; State; Zip Code BRYAN, TX 77803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4442/4629 Rpt: 4445/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY, DAVID <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78735	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) ATTORNEY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY, MAUREEN <hr/> Contributor address; City; State; Zip Code CAMBRIDGE, MA 02138	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY, TONIA <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ACC
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLOCK, ANNE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77003	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) COMMUNITY DEVELOPER		Employer (See Instructions) MY CONNECT COMMUNITY
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLOCK, LORI <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4443/4629 Rpt: 4446/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLOW, STUART <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78759	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) TEXAS LEGAL SERVICES CENTER
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLOW, STUART <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) TEXAS LEGAL SERVICES CENTER
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITMAN, BARBARA <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10023	Amount of Contribution (\$) \$524.00
Principal occupation / Job title (See Instructions) THEATRICAL PRODUCER		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITMAN, LOIS <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10024	Amount of Contribution (\$) \$524.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITMIRE, WHITNEY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) WHITMIRE & MUNOZ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4444/4629 Rpt: 4447/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITMIRE, WHITNEY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77018	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CONSULTANT		9 Employer (See Instructions) WHITMIRE & MUNOZ
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITNEY, HELEN <hr/> Contributor address; City; State; Zip Code PORT GIBSON, MS 39150	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITNEY, HELEN <hr/> Contributor address; City; State; Zip Code PORT GIBSON, MS 39150	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITTAKER, JAMES <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78232	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITTEMORE, DONNA <hr/> Contributor address; City; State; Zip Code MICO, TX 78056	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4445/4629 Rpt: 4448/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITTINGTON, KATY <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76209	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ASSET MANAGEMENT		9 Employer (See Instructions) GREYSTONE SERVICING COMPANY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITTINGTON, KATY <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSET MANAGEMENT		Employer (See Instructions) GREYSTONE SERVICING COMPANY
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIANT, ELAINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIANT, ELAINE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4446/4629 Rpt: 4449/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4447/4629 Rpt: 4450/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIATROWSKI, LAUSANNE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICK, AUDREY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICK, AUDREY <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4448/4629 Rpt: 4451/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICK, AUDREY <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76012	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICK, CARLISLE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707-1706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICK, CARLISLE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77707-1706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKHAM, KATE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76011	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKHAM, KATE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4449/4629 Rpt: 4452/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKHAM, KATE <hr/> 6 Contributor address; City; State; Zip Code ARLINGTON, TX 76011	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKSTROM, LINNEA <hr/> Contributor address; City; State; Zip Code PALO ALTO, CA 94306	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKSTROM WARD, SALLIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOTARY & SHIPPING SALES		Employer (See Instructions) THE UPS STORE 6734
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKSTROM WARD, SALLIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETAIL MANAGER		Employer (See Instructions) THE UPS STORE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKSTROM WARD, SALLIE <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOTARY & SHIPPING SALES		Employer (See Instructions) THE UPS STORE 6734

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4450/4629 Rpt: 4453/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKSTROM WARD, SALLIE <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETAIL MANAGER		9 Employer (See Instructions) THE UPS STORE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIDMER, ANDREW <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) INTERNAL MEDICINE PHYSICIAN		Employer (See Instructions) BSWH
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIEDERHOEFT, HEATHER <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONTENT CREATOR		Employer (See Instructions) FORTRA
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIEDERIN, GREG <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68134	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUPPORT SPECIALIST		Employer (See Instructions) DMSI SOFTWARE
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIEDERIN, GREG <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68134	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SUPPORT SPECIALIST		Employer (See Instructions) DMSI SOFTWARE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4451/4629 Rpt: 4454/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIEDNER, JEFF <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) DIRECTOR		9 Employer (See Instructions) NONPROFIT
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIENER, ROBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIERSMA, JOAN <hr/> Contributor address; City; State; Zip Code BOKEELIA, FL 33922	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIERSMA, JOAN <hr/> Contributor address; City; State; Zip Code BOKEELIA, FL 33922	Amount of Contribution (\$) \$1.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIGGANS, RACHEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) TEXAS CHILDRENS HOSPITAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4452/4629 Rpt: 4455/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIGGINS, FRAN <hr/> 6 Contributor address; City; State; Zip Code CLEARWATER, FL 33760	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIGGINS, JESSICA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) HCP4
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIGGINS, REYNOLD <hr/> Contributor address; City; State; Zip Code LAS CRUCES, NM 88011-9351	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIGGINS, REYNOLD <hr/> Contributor address; City; State; Zip Code HALF MOON BAY, CA 94919	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIGHTMAN, JASMINE <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) RRISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4453/4629 Rpt: 4456/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIKSE, STEVEN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78727		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBANKS, BEN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EL PASO, TX 79912-3442		
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) TEXAS BLUE ACTION
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBANKS, BEN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EL PASO, TX 79912-3442		
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) TEXAS BLUE ACTION
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBANKS, BEN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code EL PASO, TX 79912		
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) TEXAS BLUE ACTION
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBANKS, BEN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code EL PASO, TX 79912-3442		
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) TEXAS BLUE ACTION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4454/4629 Rpt: 4457/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBANKS, KENNETH	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBERT, BRITTANY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KATY, TX 77450		
Principal occupation / Job title (See Instructions) SECURITY ENGINEER		Employer (See Instructions) BINTI, INC
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBY, ELIZA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) THRIVE PET HEALTHCARE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILBY, ELIZA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78717		
Principal occupation / Job title (See Instructions) VETERINARIAN		Employer (See Instructions) THRIVE PET HEALTHCARE
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILCOX, ARTHUR	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code GREENSBORO, NC 27408		
Principal occupation / Job title (See Instructions) LEASING AGENT		Employer (See Instructions) WILCOX & ASSOC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4455/4629 Rpt: 4458/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILCOX, DANIEL <hr/> 6 Contributor address; City; State; Zip Code CHILLICOTHE, OH 45601	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILCOX, JOANNE <hr/> Contributor address; City; State; Zip Code MADISON, CT 06443	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PERSONAL TRAINER		Employer (See Instructions) SELF
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDE, FRANCESKA <hr/> Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDE, FRANCESKA <hr/> Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDE, FRANCESKA <hr/> Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4456/4629 Rpt: 4459/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDE, FRANCESKA <hr/> 6 Contributor address; City; State; Zip Code FAIRFAX STATION, VA 22039	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, LAURA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, LAURA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, LAURA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, LAURA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4457/4629 Rpt: 4460/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, LAURA <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75043	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, LAURA <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, NANCY <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CA 90712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) GGUSD
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, NANCY <hr/> Contributor address; City; State; Zip Code LAKEWOOD, CA 90712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) GGUSD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDER, NICHOLAS <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FRAUD CONTROL MGR		Employer (See Instructions) TOYOTA FINANCIAL SERVICES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4458/4629 Rpt: 4461/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDMAN, DAVID <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75230	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) SMALL BUSINESS OWNER		9 Employer (See Instructions) DAVID R. WILDMAN
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILDMAN, JANICE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) APPRAISER		Employer (See Instructions) CBRE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILEY, JILL <hr/> Contributor address; City; State; Zip Code BROCKTON, MA 02301	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILHELM, FRANYA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILHELMY, ROLAND <hr/> Contributor address; City; State; Zip Code RANCHO SANTA FE, CA 92067	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4459/4629 Rpt: 4462/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILHITE, TERRI <hr/> 6 Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) FINANCE AND ADMINISTRATION MANAGER		9 Employer (See Instructions) WILHITE LAND SURVEYING
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILHITE, TERRI <hr/> Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) FINANCE AND ADMINISTRATION MANAGER		Employer (See Instructions) WILHITE LAND SURVEYING
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILK, VINCENT <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60026	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ENTERPRISE MOBILITY
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKER, MARY <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, AMY <hr/> Contributor address; City; State; Zip Code ST PAUL, MN 55104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4460/4629 Rpt: 4463/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, ANGENET <hr/> 6 Contributor address; City; State; Zip Code KILLEEN, TX 76549	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) KILLEEN ISD
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, ANGENET <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDUCATOR		Employer (See Instructions) KILLEEN ISD
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, CHRISTINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) GAME NIGHT KIT
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, CHRISTINA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) GAME NIGHT KIT
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4461/4629 Rpt: 4464/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75711	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75711	Amount of Contribution (\$) \$33.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4462/4629 Rpt: 4465/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75711	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKERSON, D. KAREN <hr/> Contributor address; City; State; Zip Code TYLER, TX 75711	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKES, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230-2903	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) BIOMEDICAL ENGINEER		Employer (See Instructions) 3M
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKES, ROBERT <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78230-2903	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) BIOMEDICAL ENGINEER		Employer (See Instructions) 3M
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKESEN, MICHAEL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751-1077	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) ASCENSION HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4463/4629 Rpt: 4466/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, DAVID <hr/> 6 Contributor address; City; State; Zip Code MARFA, TX 79843-1555	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, JULI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, JULI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, JULI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, KEN <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4464/4629 Rpt: 4467/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, KEN <hr/> 6 Contributor address; City; State; Zip Code CRAWFORD, TX 76638	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, KEN <hr/> Contributor address; City; State; Zip Code CRAWFORD, TX 76638	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, MICHAEL <hr/> Contributor address; City; State; Zip Code GREENWELL SPRINGS, LA 70739	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, MICHAEL <hr/> Contributor address; City; State; Zip Code GREENWELL SPRINGS, LA 70739	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINS, SAM <hr/> Contributor address; City; State; Zip Code SAN RAFAEL, CA 94903	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) FINANCE/INVESTMENT BANKING		Employer (See Instructions) PANORAMIC ADVISORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4465/4629 Rpt: 4468/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINSON, JANE <hr/> 6 Contributor address; City; State; Zip Code CRAWFORD, TX 76638	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINSON, KENT <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ACD		Employer (See Instructions) IPG
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINSON, KENT <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACD		Employer (See Instructions) IPG
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINSON, KENT <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACD		Employer (See Instructions) IPG
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINSON, KENT <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACD		Employer (See Instructions) IPG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4466/4629 Rpt: 4469/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILKINSON, KENT <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11215	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) ACD		9 Employer (See Instructions) IPG
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLARS, MARIO <hr/> Contributor address; City; State; Zip Code SPRING, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLBURN, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) EASTFIELD COLLEGE/DCCCD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLERTON, EVAN <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) AUSTIN COMMUNITY COLLEGE
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLETT, BRITTANY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RECRUITER		Employer (See Instructions) GOOGLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4467/4629 Rpt: 4470/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLETT, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code HUNTSVILLE, TX 77320	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ALYSSA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) WEB DESIGNER		Employer (See Instructions) ROGERS WEALTH GROUP
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANGELA <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BENEFITS MANAGER		Employer (See Instructions) ALS GROUP USA, CORP
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANGELA <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BENEFITS MANAGER		Employer (See Instructions) ALS GROUP USA, CORP
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANGELA <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BENEFITS MANAGER, USA		Employer (See Instructions) ALS GROUP USA, CORP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4468/4629 Rpt: 4471/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANGELA <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BENEFITS MANAGER		9 Employer (See Instructions) ALS GROUP USA, CORP
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANGELA <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BENEFITS MANAGER		Employer (See Instructions) ALS GROUP USA, CORP
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANGELA <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BENEFITS MANAGER, USA		Employer (See Instructions) ALS GROUP USA, CORP
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANITA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANITA <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4469/4629 Rpt: 4472/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANITA	7 Amount of Contribution (\$) \$7.50
6 Contributor address; City; State; Zip Code AUSTIN, TX 78726		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANNIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) SECONDARY EDUCATOR		Employer (See Instructions) SPRING ISD
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANNIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) SECONDARY EDUCATOR		Employer (See Instructions) SPRING ISD
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ANNIE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77082		
Principal occupation / Job title (See Instructions) SECONDARY EDUCATOR		Employer (See Instructions) SPRING ISD
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, BERNADETTE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code MESA, AZ 85209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4470/4629 Rpt: 4473/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, BERNADETTE <hr/> 6 Contributor address; City; State; Zip Code MESA, AZ 85209	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, BERNADETTE <hr/> Contributor address; City; State; Zip Code MESA, AZ 85209	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, BRAD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) GENERAL REINSURANCE CORP
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, BRAD <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) ACTUARY		Employer (See Instructions) GENERAL REINSURANCE CORPORATION
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DANIEL <hr/> Contributor address; City; State; Zip Code MORRISVILLE, PA 19067	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4471/4629 Rpt: 4474/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DANIEL <hr/> 6 Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87110	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) POLICY ADVOCATE		9 Employer (See Instructions) AMERICAN CIVIL LIBERTIES UNION OF NEW MEXICO
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DAVID <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85224	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) HONEYWELL
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DAVID <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85224	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) HONEYWELL
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DEBORAH <hr/> Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DEBORAH <hr/> Contributor address; City; State; Zip Code HALF MOON BAY, CA 94019	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4472/4629 Rpt: 4475/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DEBRA <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77708-3824	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DEBRA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77708-3824	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH <hr/> Contributor address; City; State; Zip Code ANCHORAGE, AK 99501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HOME STRATEGIES		Employer (See Instructions) COMMUNICATIONS ASSOCIATE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH <hr/> Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH <hr/> Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4473/4629 Rpt: 4476/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4474/4629 Rpt: 4477/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4475/4629 Rpt: 4478/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4476/4629 Rpt: 4479/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELIZABETH <hr/> 6 Contributor address; City; State; Zip Code ALAMOGORDO, NM 88310	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ELVIS <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78045	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, FRED <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10018	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, GARY <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, GARY <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4477/4629 Rpt: 4480/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, GEORGINA <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, GEORGINA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, HELEN <hr/> Contributor address; City; State; Zip Code FLINT, MI 48505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ARRANGEMENT COUNSELOR		Employer (See Instructions) LAWRENCE E. MOON FUNERAL HOME
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, HOMER <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10027	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, HOMER <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10027	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4478/4629 Rpt: 4481/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, INDIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code SEBASTOPOL, CA 95472		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JAMES	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code OZARK, AL 36360		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JEAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SPRING, TX 77373		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JEAN	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code SPRING, TX 77373		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JEAN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SPRING, TX 77373		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4479/4629 Rpt: 4482/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) PARALEGAL		9 Employer (See Instructions) VIRTUS REAL ESTATE CAPITAL
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JIM <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JIM <hr/> Contributor address; City; State; Zip Code DENTON, TX 76208	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JOHN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77017	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) WILLIAMS HART & BOUNDAS, LLP
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JULIAN <hr/> Contributor address; City; State; Zip Code ATLANTA, GA 30324	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4480/4629 Rpt: 4483/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, JUNE <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) JUNE WILLIAMS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KENNETH <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75089	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KENNETH <hr/> Contributor address; City; State; Zip Code ROWLETT, TX 75089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KEONDRA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77002	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) WALMART
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KIMBERLY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) TRAVIS COUNTY, TX

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4481/4629 Rpt: 4484/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LANA <hr/> 6 Contributor address; City; State; Zip Code GERMANTOWN, MD 20876	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSISTANT		9 Employer (See Instructions) LOCKHEED MARTIN
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LASHAWN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LINDSAY <hr/> Contributor address; City; State; Zip Code RUSK, TX 75785-1131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, LYNNE <hr/> Contributor address; City; State; Zip Code MANHATTAN, NY 10001	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MALISSA <hr/> Contributor address; City; State; Zip Code HUNTSVILLE, TX 77342	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4482/4629 Rpt: 4485/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MARGARETT <hr/> 6 Contributor address; City; State; Zip Code FLORISSANT, MO 63033	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MARIA <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79925	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) EL PASO COMMUNITY COLLEGE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MARTHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MARTHA <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MARY JEAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4483/4629 Rpt: 4486/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MERCEDES <hr/> 6 Contributor address; City; State; Zip Code GARFIELD HEIGHTS, OH 44125-3709	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SHIFT SUPERVISOR		9 Employer (See Instructions) CVS
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, MIDRELL <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76119	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, NITALYA <hr/> Contributor address; City; State; Zip Code TUCSON, AZ 85748	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) ORTHODONTIST		Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, NOAH <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78251	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SYSTEMS ENGINEER		Employer (See Instructions) SALIENTCRGT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PATRICK <hr/> Contributor address; City; State; Zip Code HAGERSTOWN, MD 21742	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SYSTEMS ADMINISTRATOR		Employer (See Instructions) BYLIGHT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4484/4629 Rpt: 4487/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PATRICK	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code HAGERSTOWN, MD 21742		
8 Principal occupation / Job title (See Instructions) SYSTEMS ADMINISTRATOR		9 Employer (See Instructions) BYLIGHT
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PATRICK	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CAPGEMINI
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PATRICK	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code HOUSTON, TX 77008		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CAPGEMINI
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PEYTON	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code PALESTINE, TX 75801		
Principal occupation / Job title (See Instructions) BANKING TECHNOLOGY		Employer (See Instructions) TNB
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, PHILLIP	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code DETROIT, MI 48227		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) METROPOLIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4485/4629 Rpt: 4488/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4486/4629 Rpt: 4489/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> 6 Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, R ROCQUE L <hr/> Contributor address; City; State; Zip Code CHARLOTTE, NC 28278	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, REBECCA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, REBECCA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76017	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) NONE		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4487/4629 Rpt: 4490/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ROBERT <hr/> 6 Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28311-1895	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ROBERT <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28311-1895	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ROLAND (RON) <hr/> Contributor address; City; State; Zip Code MILLERSVILLE, MD 21108	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ROLAND (RON) <hr/> Contributor address; City; State; Zip Code MILLERSVILLE, MD 21108	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, ROLAND (RON) <hr/> Contributor address; City; State; Zip Code MILLERSVILLE, MD 21108	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4488/4629 Rpt: 4491/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, RON	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code EULESS, TX 76039		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, RON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code EULESS, TX 76039		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, SANDRA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HUNTSVILLE, AL 35801		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) N/A
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, SHARON	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HOUSTON, TX 77054		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, SUSAN	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77706		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4489/4629 Rpt: 4492/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, SUSAN <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77706	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TOMMIE <hr/> Contributor address; City; State; Zip Code VIDOR, TX 77670	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, WINSTON G. <hr/> Contributor address; City; State; Zip Code MARLIN, TX 76661-2823	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) DIRECTOR OF MARKETING AND ECONOMIC		Employer (See Instructions) CITY OF MARLIN
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS SR, JOHNNIE JAMES <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SCHOOL BUS DRIVER		Employer (See Instructions) KILLEEN ISD
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS-PARKER, SANDRA <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28312	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4490/4629 Rpt: 4493/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS-PARKER, SANDRA <hr/> 6 Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28312	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS-PARKER, SANDRA <hr/> Contributor address; City; State; Zip Code FAYETTEVILLE, NC 28312	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, JOSEPHINE <hr/> Contributor address; City; State; Zip Code HYE, TX 78635	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, JOSEPHINE <hr/> Contributor address; City; State; Zip Code HYE, TX 78635	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, JOSEPHINE <hr/> Contributor address; City; State; Zip Code HYE, TX 78635	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4491/4629 Rpt: 4494/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, KARL <hr/> 6 Contributor address; City; State; Zip Code DAYTON, OH 45402	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) MANAGER		9 Employer (See Instructions) SELF EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, LARRY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, MIKE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MICROCHIP
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, MIKE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) MICROCHIP
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, RODNEY <hr/> Contributor address; City; State; Zip Code GLOUCESTER POINT, VA 23072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TRANSPORTATION		Employer (See Instructions) YCSD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4492/4629 Rpt: 4495/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, STEPHEN <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, STEPHEN <hr/> Contributor address; City; State; Zip Code IRVING, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIE, JANET <hr/> Contributor address; City; State; Zip Code BETHEL, ME 04217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIE, JANET <hr/> Contributor address; City; State; Zip Code BETHEL, ME 04217	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MESSAGE THERAPIST		Employer (See Instructions) SELF
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIE, KATHERINE <hr/> Contributor address; City; State; Zip Code ANNAPOLIS, MD 21403	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4493/4629 Rpt: 4496/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIER, JOHN <hr/> 6 Contributor address; City; State; Zip Code HERNANDO, FL 34442	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIER, JOHN <hr/> Contributor address; City; State; Zip Code HERNANDO, FL 34442	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRA ANALYST		Employer (See Instructions) ARES TECHNICAL SERVICES
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, ANDREW <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRA ANALYST		Employer (See Instructions) ARES TECHNICAL SERVICES
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, JACQUELINE <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4494/4629 Rpt: 4497/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, JACQUELINE <hr/> 6 Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, JACQUELINE <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, JACQUELINE <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, JONNA <hr/> Contributor address; City; State; Zip Code FARMERS BRANCH, TX 75234	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) FLIGHT ATTENDANT		Employer (See Instructions) AMERICAN AIRLINES
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, MARY <hr/> Contributor address; City; State; Zip Code GLENN HEIGHTS, TX 75154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4495/4629 Rpt: 4498/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, STEPHEN	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code SPRING, TX 77381		
8 Principal occupation / Job title (See Instructions) ENERGY EMPLOYEE		9 Employer (See Instructions) HESS CORPORATION
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, STEPHEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SPRING, TX 77381		
Principal occupation / Job title (See Instructions) ENERGY EMPLOYEE		Employer (See Instructions) HESS CORPORATION
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS-THORNBURY, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS COLLEGE
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS-THORNBURY, MARY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code TYLER, TX 75701		
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) TEXAS COLLEGE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLOUGHBY, GEORGE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code SEATTLE, WA 98112		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4496/4629 Rpt: 4499/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILMORE, ETHELENE <hr/> 6 Contributor address; City; State; Zip Code BROOKSHIRE, TX 77423	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, ANGIE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, ANGIE <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) PFLUGERVILLE ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, BO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, CAROL <hr/> Contributor address; City; State; Zip Code SCURRY, TX 75158	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4497/4629 Rpt: 4500/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, CAROL	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code SCURRY, TX 75158		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, CHARLES	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HARKER HEIGHTS, TX 76548		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, CLAUDIA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DAREN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code KALISPELL, MT 59901		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBRA	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code DAYTON, NV 89403		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4498/4629 Rpt: 4501/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBRA <hr/> 6 Contributor address; City; State; Zip Code DAYTON, NV 89403	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBRA <hr/> Contributor address; City; State; Zip Code DAYTON, NV 89403	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBRA <hr/> Contributor address; City; State; Zip Code DAYTON, NV 89403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBRA <hr/> Contributor address; City; State; Zip Code DAYTON, NV 89403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBRA <hr/> Contributor address; City; State; Zip Code DAYTON, NV 89403	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4499/4629 Rpt: 4502/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, ERICA <hr/> 6 Contributor address; City; State; Zip Code YUCAIPA, CA 92399	7 Amount of Contribution (\$) \$100.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, FELECIA <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) SIGNATURE HEALTHCARE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, FELECIA <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) SIGNATURE HEALTHCARE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, FELECIA <hr/> Contributor address; City; State; Zip Code MEMPHIS, TN 38105	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) SIGNATURE HEALTHCARE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, GERALD <hr/> Contributor address; City; State; Zip Code KATY, TX 77450	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) CARDINAL MEMORIAL ACQUISITION COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4500/4629 Rpt: 4503/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, GRACE <hr/> 6 Contributor address; City; State; Zip Code ROCKFORD, IL 61101	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, II, MARVIN <hr/> Contributor address; City; State; Zip Code FAIRVIEW, WV 26570	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JAMES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SR. LEGE DIRECTOR		Employer (See Instructions) HOUSE OF REPS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4501/4629 Rpt: 4504/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JAN <hr/> 6 Contributor address; City; State; Zip Code CIBOLO, TX 78108	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JEAN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JOE <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JOE <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JOHN <hr/> Contributor address; City; State; Zip Code CULVER CITY, CA 90230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) MOTION PICTURE SOUND EDITOR		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4502/4629 Rpt: 4505/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, JULIE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77084	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, KATIE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77095	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CHILDCARE DIRECTOR		Employer (See Instructions) PRINCE OF PEACECATHOLIC CHURCH
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, KEN <hr/> Contributor address; City; State; Zip Code VALLEY VILLAGE, CA 91607	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PUBLICIST		Employer (See Instructions) SELF
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LEIGH ANN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912-2006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) UNIVERSITY OF MASSACHUSETTS GLOBAL
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LEIGH ANN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912-2006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) UNIVERSITY OF MASSACHUSETTS GLOBAL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4503/4629 Rpt: 4506/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LEIGH ANN <hr/> 6 Contributor address; City; State; Zip Code EL PASO, TX 79912-2006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		9 Employer (See Instructions) UNIVERSITY OF MASSACHUSETTS GLOBAL
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LEIGH ANN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912-2006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNIVERSITY PROFESSOR		Employer (See Instructions) UNIVERSITY OF MASSACHUSETTS GLOBAL
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LINK <hr/> Contributor address; City; State; Zip Code NEWBURY PARK, CA 91320	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE ARCHITECHT		Employer (See Instructions) COMPULINK
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LINK <hr/> Contributor address; City; State; Zip Code NEWBURY PARK, CA 91320	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ARCHITECHT		Employer (See Instructions) COMPULINK
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, LINK <hr/> Contributor address; City; State; Zip Code NEWBURY PARK, CA 91320	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) SOFTWARE ARCHITECHT		Employer (See Instructions) COMPULINK

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4504/4629 Rpt: 4507/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, NANCY <hr/> 6 Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, NANCY <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, PAUL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, PHILLIP <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, PHILLIP <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4505/4629 Rpt: 4508/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, PHILLIP <hr/> 6 Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, PHILLIP <hr/> Contributor address; City; State; Zip Code FREDERICKSBURG, TX 78624	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, RENNETTE <hr/> Contributor address; City; State; Zip Code CONROE, TX 77304	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, ROBERT <hr/> Contributor address; City; State; Zip Code OAK HARBOR, WA 98277	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, ROBERT <hr/> Contributor address; City; State; Zip Code OAK HARBOR, WA 98277	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4506/4629 Rpt: 4509/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, RUSSELL <hr/> 6 Contributor address; City; State; Zip Code MURPHY, TX 75094	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, SAMUEL <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94709	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, SAMUEL <hr/> Contributor address; City; State; Zip Code BERKELEY, CA 94709	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, SUZZETTE <hr/> Contributor address; City; State; Zip Code SUN CITY, CA 92586-0782	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, SUZZETTE <hr/> Contributor address; City; State; Zip Code SUN CITY, CA 92586-0782	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4507/4629 Rpt: 4510/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, THOMAS	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75229		
8 Principal occupation / Job title (See Instructions) WESTERN FRONTIER DEVELOPMENT		9 Employer (See Instructions) CEO
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, THOMAS	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75229		
Principal occupation / Job title (See Instructions) WESTERN FRONTIER DEVELOPMENT		Employer (See Instructions) CEO
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, TRACY	Amount of Contribution (\$) \$15.25
Contributor address; City; State; Zip Code ROSENBERG, TX 77469		
Principal occupation / Job title (See Instructions) FIELD MEDICAL DIRECTOR		Employer (See Instructions) PFIZER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, WALTER	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, WALTER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code ST CLOUD, MN 56301		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4508/4629 Rpt: 4511/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, WILLIAM <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77393	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILTZ, MONIQUE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) UH
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIMBERLEY, KIM <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIMBERLEY, KIM <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIMBERLEY, KIM <hr/> Contributor address; City; State; Zip Code BASTROP, TX 78602	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEL VALLE ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4509/4629 Rpt: 4512/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIMBERLEY, KIM <hr/> 6 Contributor address; City; State; Zip Code BASTROP, TX 78602	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DEL VALLE ISD
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINA, GLENDA <hr/> Contributor address; City; State; Zip Code CULVER CITY, CA 90230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINAKUR, LESLIE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINBOURN, MARGARET <hr/> Contributor address; City; State; Zip Code CENTRAL, SC 29630	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) ANMED HEALTH
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINCHESTER, ANN <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76133	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ART INSTRUCTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4510/4629 Rpt: 4513/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINCHESTER, ANN <hr/> 6 Contributor address; City; State; Zip Code FT WORTH, TX 76133	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) ART INSTRUCTOR		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINCHESTER, ANN <hr/> Contributor address; City; State; Zip Code FT WORTH, TX 76133	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ART INSTRUCTOR		Employer (See Instructions) SELF
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINCHESTER, DONALD E <hr/> Contributor address; City; State; Zip Code MOORESVILLE, NC 28117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINCHESTER, DONALD E <hr/> Contributor address; City; State; Zip Code MOORESVILLE, NC 28117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINDHAM, BERNARD <hr/> Contributor address; City; State; Zip Code TALLAHASSEE, FL 32309	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) FPSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4511/4629 Rpt: 4514/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINE, ANDREW <hr/> 6 Contributor address; City; State; Zip Code BOERNE, TX 78006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) PRINCIPAL CLOUD CONSULTANT/ENGINEER		9 Employer (See Instructions) TRACE3, INC.
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINE, ANDREW <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRINCIPAL CLOUD CONSULTANT/ENGINEER		Employer (See Instructions) TRACE3, INC.
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINE, ANDY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRINCIPAL CLOUD CONSULTANT/ENGINEER		Employer (See Instructions) TRACE3, INC
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINE, ANDY <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PRINCIPAL CLOUD CONSULTANT/ENGINEER		Employer (See Instructions) TRACE3, INC
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINFIELD, PHIL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CREATIVE DIRECTOR		Employer (See Instructions) LIVERAMP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4512/4629 Rpt: 4515/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINFIELD, PHIL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78729	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CREATIVE DIRECTOR		9 Employer (See Instructions) LIVERAMP
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINFREE, JILL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78752	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) MEDICAL CODER		Employer (See Instructions) BANNER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WING, LINDA <hr/> Contributor address; City; State; Zip Code RICHMOND, CA 94803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WING JR, FEAGIN <hr/> Contributor address; City; State; Zip Code LAKEWOOD, OH 44107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CHEMIST		Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINGATE, ELIZABETH <hr/> Contributor address; City; State; Zip Code VALDEZ, AK 99686	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4513/4629 Rpt: 4516/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINGATE, ELIZABETH	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code VALDEZ, AK 99686		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINGATE, ELIZABETH	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code VALDEZ, AK 99686		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINGERT, LINDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINGERT, LINDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINGERT, LINDA	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code CEDAR PARK, TX 78613		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4514/4629 Rpt: 4517/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINKELMAN, MARC <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78744	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) EXECUTIVE		9 Employer (See Instructions) CALENDAR SERVICES, INC.
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINKELMAN, MARC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78744	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) CALENDAR SERVICES, INC.
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSLOW, DYLAN <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84102-2721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		Employer (See Instructions) SALT LAKE CITY PUBLIC LIBRARY
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSLOW, DYLAN <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84102-2721	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		Employer (See Instructions) SALT LAKE CITY PUBLIC LIBRARY
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSLOW, DYLAN <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84102-2721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		Employer (See Instructions) SALT LAKE CITY PUBLIC LIBRARY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4515/4629 Rpt: 4518/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSLOW, DYLAN <hr/> 6 Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84102-2721	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		9 Employer (See Instructions) SALT LAKE CITY PUBLIC LIBRARY
Date 12/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSLOW, DYLAN <hr/> Contributor address; City; State; Zip Code SALT LAKE CITY, UT 84102-2721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		Employer (See Instructions) SALT LAKE CITY PUBLIC LIBRARY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSTON, KAREN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINSTON, KEVIN <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTER, BRIAN AND PAT <hr/> Contributor address; City; State; Zip Code ELLCOTT CITY, MD 21042	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		Employer (See Instructions) MEDICAL EYE CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4516/4629 Rpt: 4519/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTER, BRIAN AND PAT <hr/> 6 Contributor address; City; State; Zip Code ELLICOTT CITY, MD 21042	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		9 Employer (See Instructions) MEDICAL EYE CENTER
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTER, BRIAN AND PAT <hr/> Contributor address; City; State; Zip Code ELLICOTT CITY, MD 21042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		Employer (See Instructions) MEDICAL EYE CENTER
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTER, BRIAN AND PAT <hr/> Contributor address; City; State; Zip Code ELLICOTT CITY, MD 21042	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		Employer (See Instructions) MEDICAL EYE CENTER
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTER, BRIAN AND PAT <hr/> Contributor address; City; State; Zip Code ELLICOTT CITY, MD 21042	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) OPHTHALMOLOGIST		Employer (See Instructions) MEDICAL EYE CENTER
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERBOTTOM, ANNA <hr/> Contributor address; City; State; Zip Code SANDIA, TX 78383	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4517/4629 Rpt: 4520/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERBOTTOM, CAROL <hr/> 6 Contributor address; City; State; Zip Code MAYS LANDING, NJ 08330	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERBOTTOM, CAROL <hr/> Contributor address; City; State; Zip Code MAYS LANDING, NJ 08330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERBOTTOM, CAROL <hr/> Contributor address; City; State; Zip Code MAYS LANDING, NJ 08330	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, GWENDOLYN <hr/> Contributor address; City; State; Zip Code JACKSON, MS 39206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COLLEGE ADMINISTRATOR		Employer (See Instructions) JARVIS CHRISTIAN UNIVERSITY
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, MAURICE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75231	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4518/4629 Rpt: 4521/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, MAURICE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75231		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, MAURICE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, MAURICE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, MAURICE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINTERS, MAURICE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code DALLAS, TX 75231		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4519/4629 Rpt: 4522/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY <hr/> 6 Contributor address; City; State; Zip Code BURBANK, CA 91505	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, HARRY <hr/> Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, PAULA <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85286	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4520/4629 Rpt: 4523/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, PAULA <hr/> 6 Contributor address; City; State; Zip Code CHANDLER, AZ 85286	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRTH, PAULA <hr/> Contributor address; City; State; Zip Code CHANDLER, AZ 85286	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZMAN, JAMES <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		Employer (See Instructions) SYNEOS HEALTH
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZMAN, JAMES <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		Employer (See Instructions) SYNEOS HEALTH
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZMAN, JAMES <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CLINICAL RESEARCH		Employer (See Instructions) SYNEOS HEALTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4521/4629 Rpt: 4524/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZMAN, JAMES <hr/> 6 Contributor address; City; State; Zip Code TYLER, TX 75709	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZMAN, JAMES <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WIRZMAN, JAMES <hr/> Contributor address; City; State; Zip Code TYLER, TX 75709	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISE, JACQUELINE <hr/> Contributor address; City; State; Zip Code BRISTOW, VA 20136	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISE, LINDA <hr/> Contributor address; City; State; Zip Code VENTURA, CA 93004	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4522/4629 Rpt: 4525/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISE, LINDA <hr/> 6 Contributor address; City; State; Zip Code VENTURA, CA 93004	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) VENTURA COUNTY
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISE, STEPHEN <hr/> Contributor address; City; State; Zip Code CLEVELAND, OH 44112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISE, STEPHEN <hr/> Contributor address; City; State; Zip Code CLEVELAND, OH 44112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISEMAN, HAL <hr/> Contributor address; City; State; Zip Code HOTCHKISS, CO 81419	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISEMAN, HAL <hr/> Contributor address; City; State; Zip Code HOTCHKISS, CO 81419	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4523/4629 Rpt: 4526/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISHARD, LYNN <hr/> 6 Contributor address; City; State; Zip Code HAGERSTOWN, MD 21740	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WISNIEWSKI, CHRISTINE <hr/> Contributor address; City; State; Zip Code WELLFLEET, MA 02667	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) HISTORIAN		Employer (See Instructions) SELF
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITHROW, LAUREN <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75043	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) JOURNALIST		Employer (See Instructions) RAINS COUNTY LEADER (NEWSPAPER)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITHROW, MATTHEW <hr/> Contributor address; City; State; Zip Code ROMEO, MI 48065	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) STELLANTIS
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITKIN, BONITA <hr/> Contributor address; City; State; Zip Code GULF BREEZE, FL 32563	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) SOCCER MOM		Employer (See Instructions) MY KIDS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4524/4629 Rpt: 4527/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITKIN, BONITA <hr/> 6 Contributor address; City; State; Zip Code GULF BREEZE, FL 32563	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) SOCCER MOM		9 Employer (See Instructions) MY KIDS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITKOWSKI, SUSAN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60646	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NONE
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITONSKY, CARL <hr/> Contributor address; City; State; Zip Code BRYN MAWR, PA 19010	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITT, BEVERLY <hr/> Contributor address; City; State; Zip Code BULVERDE, TX 78163	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITT, CHARLES <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4525/4629 Rpt: 4528/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITTENMYER, MARGARET <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77009	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) ARNOLD VENTURES
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITTGENFELD, TANIA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WITTLIFF, ALBERT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77059	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SLEF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOELPER JR, GORDON L <hr/> Contributor address; City; State; Zip Code JUPITER, FL 33458	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOESSNER GAUCI, KATHRYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NANNY		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4526/4629 Rpt: 4529/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOESSNER GAUCI, KATHRYN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NANNY		9 Employer (See Instructions) NONE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOHN, CALEB <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLCHANSKY, ALEX <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLCOTT, PATRICIA <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34205	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLCOTT, PATRICIA <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34205	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4527/4629 Rpt: 4530/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLDOW, PAMELA <hr/> 6 Contributor address; City; State; Zip Code NARBERTH, PA 19072	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLENCHECK, DONNA <hr/> Contributor address; City; State; Zip Code YONKERS, NY 10710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SECRETARY		Employer (See Instructions) CONCEPT GENERAL CONTRACTING
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, CAROL <hr/> Contributor address; City; State; Zip Code VILLAS, NJ 08251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, HOLLY <hr/> Contributor address; City; State; Zip Code NEW YORK, NY 10003	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) COLLEGE ADVISOR		Employer (See Instructions) COLLEGE ADVISOR
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, JASMINE <hr/> Contributor address; City; State; Zip Code COVENTRY, CT 06238	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED MASSAGE THERAPIST		Employer (See Instructions) SELF/RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4528/4629 Rpt: 4531/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, JASMINE <hr/> 6 Contributor address; City; State; Zip Code COVENTRY, CT 06238	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RETIRED MESSAGE THERAPIST		9 Employer (See Instructions) SELF/RETIRED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, MARY <hr/> Contributor address; City; State; Zip Code MULDOON, TX 78949	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, MARY <hr/> Contributor address; City; State; Zip Code MULDOON, TX 78949	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, MATTHEW <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) GRANTS AND CONTRACTS SPECIALIST III		Employer (See Instructions) PUBLIC HEALTH INSTITUTE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, MATTHEW <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRANTS AND CONTRACTS SPECIALIST III		Employer (See Instructions) PUBLIC HEALTH INSTITUTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4529/4629 Rpt: 4532/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, MATTHEW <hr/> 6 Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) GRANTS AND CONTRACTS SPECIALIST III		9 Employer (See Instructions) PUBLIC HEALTH INSTITUTE
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, MATTHEW <hr/> Contributor address; City; State; Zip Code WALNUT CREEK, CA 94597	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GRANTS AND CONTRACTS SPECIALIST III		Employer (See Instructions) PUBLIC HEALTH INSTITUTE
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, WHITNEY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFE, ADRIANN <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$2.18
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFE, DAVID <hr/> Contributor address; City; State; Zip Code MCKINNEY, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4530/4629 Rpt: 4533/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFE, DAVID <hr/> 6 Contributor address; City; State; Zip Code MCKINNEY, TX 75070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFE, GARY <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60611	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFF, SHARON <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFSON, JENNIFER <hr/> Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) ISO NEW ENGLAD
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFSON, JENNIFER <hr/> Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) ISO NEW ENGLAD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4531/4629 Rpt: 4534/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLFSON, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code NORTHAMPTON, MA 01060	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) ISO NEW ENGLAD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLLERSON, BRANDON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) VIVENT HEALTH
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLTERS, ERIC <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WEB SPECIALIST		Employer (See Instructions) CENTERPOINT ENERGY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLTERS, ERIC <hr/> Contributor address; City; State; Zip Code SPRING, TX 77380	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) WEB SPECIALIST		Employer (See Instructions) CENTERPOINT ENERGY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLTERS, KATIE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) AMD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4532/4629 Rpt: 4535/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, CHRIS	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78731		
8 Principal occupation / Job title (See Instructions) COPYWRITER		9 Employer (See Instructions) HCB HEALTH
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, CHRIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) COPYWRITER		Employer (See Instructions) HCB HEALTH
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, CHRIS	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) COPYWRITER		Employer (See Instructions) HCB HEALTH
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, CHRIS	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code AUSTIN, TX 78731		
Principal occupation / Job title (See Instructions) COPYWRITER		Employer (See Instructions) HCB HEALTH
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, KATIE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845		
Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		Employer (See Instructions) TEXAS A&M TRANSPORTATION INSTITUTE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4533/4629 Rpt: 4536/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, KATIE <hr/> 6 Contributor address; City; State; Zip Code COLLEGE STATION, TX 77845	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RESEARCH SCIENTIST		9 Employer (See Instructions) TEXAS A&M TRANSPORTATION INSTITUTE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, FRANK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, FRANK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, FRANK <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, GEORGE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77035	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4534/4629 Rpt: 4537/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, GREGG <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76104	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) SALES ENGINEER		9 Employer (See Instructions) AEMC
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, GREGG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES ENGINEER		Employer (See Instructions) AEMC
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, GREGG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) SALES ENGINEER		Employer (See Instructions) AEMC
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, GREGG <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SALES ENGINEER		Employer (See Instructions) AEMC
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, HOU-HOU <hr/> Contributor address; City; State; Zip Code CONROE, TX 77385	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4535/4629 Rpt: 4538/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, HOU-HOU <hr/> 6 Contributor address; City; State; Zip Code CONROE, TX 77385	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WONG, JOEL <hr/> Contributor address; City; State; Zip Code HAYWARD, CA 94542	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOO, WENDY <hr/> Contributor address; City; State; Zip Code TALLAHASSEE, FL 32312	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, ANDREA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94611	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, ANDREA <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94611	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4536/4629 Rpt: 4539/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, CHARLES M <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75252	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, CHRISTIE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, CHRISTIE <hr/> Contributor address; City; State; Zip Code DENTON, TX 76201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, GRANT <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BREWMASTER/OWNER		Employer (See Instructions) REVOLVER BREWING
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, GRANT <hr/> Contributor address; City; State; Zip Code GRANBURY, TX 76049	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BREWMASTER/OWNER		Employer (See Instructions) REVOLVER BREWING

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4537/4629 Rpt: 4540/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, GRANT 6 Contributor address; City; State; Zip Code GRANBURY, TX 76049	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) BREWMaster/OWNER		9 Employer (See Instructions) REVOLVER BREWING
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, JUSTIN Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCHULMAN LOPEZ HOFFER ADELSTEIN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, MATTHEW Contributor address; City; State; Zip Code WASHINGTON, DC 20015	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FREE PRESS
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, MATTHEW Contributor address; City; State; Zip Code WASHINGTON, DC 20015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FREE PRESS
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, MITZI Contributor address; City; State; Zip Code WACO, TX 76706	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4538/4629 Rpt: 4541/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, PATRICIA <hr/> 6 Contributor address; City; State; Zip Code KELLER, TX 76248	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, PATRICIA <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, WHITNEY <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76104	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) FORT WORTH FOCUSED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) ANN WOODALL
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, ANN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PHOTOGRAPHER		Employer (See Instructions) ANN WOODALL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4539/4629 Rpt: 4542/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, LINDA K <hr/> 6 Contributor address; City; State; Zip Code KENNEWICK, WA 99337	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, LINDA K <hr/> Contributor address; City; State; Zip Code KENNEWICK, WA 99337	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, MARYLYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, MARYLYNN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODALL, ZACHARY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78756	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) APPLE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4540/4629 Rpt: 4543/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, LISA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76119	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) JUDGE		9 Employer (See Instructions) TARRANT COUNTY
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, MARY <hr/> Contributor address; City; State; Zip Code DESOTO, TX 75115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, OWEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, OWEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, OWEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4541/4629 Rpt: 4544/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, OWEN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, OWEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, OWEN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODARD, W SHAYNE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) GR		Employer (See Instructions) VALERO
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODHEAD III, "PETE" HERBERT <hr/> Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23453-2209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4542/4629 Rpt: 4545/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODHEAD III, "PETE" HERBERT <hr/> 6 Contributor address; City; State; Zip Code VIRGINIA BEACH, VA 23453-2209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODHULL, SARA <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INFORMATION ARCHITECT		Employer (See Instructions) SELF
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODHULL, SARA <hr/> Contributor address; City; State; Zip Code MOUNTAIN VIEW, CA 94043	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) INFORMATION ARCHITECT		Employer (See Instructions) SELF
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODLAND, DOVE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) TRICOASTAL SOLUTIONS
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODLAND, DOVE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) TRICOASTAL SOLUTIONS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4543/4629 Rpt: 4546/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODLAND, DOVE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) TRICOASTAL SOLUTIONS
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODRUFF, CLAUDIA <hr/> Contributor address; City; State; Zip Code GLENVIEW, IL 60025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODRUFF, SAMUEL <hr/> Contributor address; City; State; Zip Code OAK CREEK, WI 53154-5037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, DEANNA <hr/> Contributor address; City; State; Zip Code PORTLAND, OR 97217	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, DUSTIN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77047	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PROPERTY MANAGER		Employer (See Instructions) BOXER PROPERTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4544/4629 Rpt: 4547/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, JULIA	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78704		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, LAURE	Amount of Contribution (\$) \$6,000.00
Contributor address; City; State; Zip Code PALO ALTO, CA 94301		
Principal occupation / Job title (See Instructions) SELF EMPLOYED		Employer (See Instructions) LAURE L WOODS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, WILLIAM L	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SAN DIEGO, CA 92116		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSMALL, CHERRY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) BEAUMONT ISD
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSMALL, CHERRY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code BEAUMONT, TX 77707		
Principal occupation / Job title (See Instructions) COUNSELOR		Employer (See Instructions) BEAUMONT ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4545/4629 Rpt: 4548/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSMALL, ELLA FAYE <hr/> 6 Contributor address; City; State; Zip Code BEAUMONT, TX 77705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSMALL, ELLA FAYE <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSON, LIN <hr/> Contributor address; City; State; Zip Code HIGHLAND VILLAGE, TX 75077	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) BANK OF AMERICA
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSON, SUE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODSON, SUE <hr/> Contributor address; City; State; Zip Code GALVESTON, TX 77550	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4546/4629 Rpt: 4549/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODWARD, OWEN (WOODY)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODWARD, OWEN (WOODY)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code GEORGETOWN, TX 78628		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODYARD, SANDRA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ARLINGTON, VA 22209		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLDRIDGE, GREG	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLDRIDGE, GREG	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code WEST LAKE HILLS, TX 78746		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4547/4629 Rpt: 4550/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLDRIDGE, SANDRA <hr/> 6 Contributor address; City; State; Zip Code GREENVILLE, TX 75401	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLDRIDGE, SANDRA <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLDRIDGE, SANDRA <hr/> Contributor address; City; State; Zip Code GREENVILLE, TX 75401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLEY, RANDY <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) TEXAS MEDICAL GROUP
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOTEN, KENNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SCOTT DOUGLASS & MCCONNICO LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4548/4629 Rpt: 4551/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOTEN, KENNON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SCOTT DOUGLASS & MCCONNICO LLP
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORD, BONNIE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORD, BONNIE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORNER, ANNE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628-8369	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORRELL, MARK <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TRAINER		Employer (See Instructions) LLNL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4549/4629 Rpt: 4552/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORTHAM, TALIBAH	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code KELLER, TX 76244		
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) TALIBAH
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOUK, NINA G	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code MENLO PARK, CA 94025		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOUK, NINA G	Amount of Contribution (\$) \$8.30
Contributor address; City; State; Zip Code MENLO PARK, CA 94025		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) SELF EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOZNIAK, RACHEL	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PORTLAND, OR 97206		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, BERNICE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4550/4629 Rpt: 4553/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, BERNICE <hr/> 6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, CARLECIA D. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CITY OF HOUSTON
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, CARLECIA D. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CITY OF HOUSTON
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, CARLECIA D. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77018	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) CITY OF HOUSTON
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, COLBY <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4551/4629 Rpt: 4554/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DEADRA <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DEADRA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DEADRA <hr/> Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DEBORAH <hr/> Contributor address; City; State; Zip Code DENTON, TX 76209	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DONNA <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4552/4629 Rpt: 4555/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DONNA <hr/> 6 Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689-2613	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DONNA <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689-2613	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DONNA & DON <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) ST. PAUL LUTHERAN CHURCH
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DONNA & DON <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) ST. PAUL LUTHERAN CHURCH
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, DONNA & DON <hr/> Contributor address; City; State; Zip Code VALLEY MILLS, TX 76689	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) ST. PAUL LUTHERAN CHURCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4553/4629 Rpt: 4556/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, ERIN <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77381	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SELF		9 Employer (See Instructions) SELF
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, JEANETTE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COSMETOLOGIST		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, JOSH <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONTRACTOR		Employer (See Instructions) INDEED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, JOYCE <hr/> Contributor address; City; State; Zip Code OMAHA, NE 68116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, KAREN <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4554/4629 Rpt: 4557/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, KATHERINE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, KELLI <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, KELLI <hr/> Contributor address; City; State; Zip Code FLOWER MOUND, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, KIMBERLY <hr/> Contributor address; City; State; Zip Code COLLEGE STATION, TX 77840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ASSISTANT DIRECTOR		Employer (See Instructions) RICE UNIVERSITY
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, KRISTIN <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76549	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4555/4629 Rpt: 4558/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, LINDA <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76108	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED SOCIAL WORKER		9 Employer (See Instructions) NONE
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, MARTHA <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) WRIGHT & ASSOCIATES
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, MELINDA <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77433	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT-HAYNES, PAMELA <hr/> Contributor address; City; State; Zip Code DEL RIO, TX 78842	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT-HAYNES, PAMELA <hr/> Contributor address; City; State; Zip Code DEL RIO, TX 78842	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4556/4629 Rpt: 4559/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT-HAYNES, PAMELA <hr/> 6 Contributor address; City; State; Zip Code DEL RIO, TX 78842	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT-HAYNES, PAMELA <hr/> Contributor address; City; State; Zip Code DEL RIO, TX 78842	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRINKLE, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76108	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRINKLE, DAVID <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76108	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WROUBEL, LEO <hr/> Contributor address; City; State; Zip Code WASHINGTON, MI 48094	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4557/4629 Rpt: 4560/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, EUGENE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77081	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) SELF
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, GENE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77081	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, JEREMY <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22102	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, JEREMY <hr/> Contributor address; City; State; Zip Code MCLEAN, VA 22102	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, VICKY <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78723	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4558/4629 Rpt: 4561/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, WEI <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77082	7 Amount of Contribution (\$) \$162.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) NEWAY BUSINESS CONSULTING
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, XIANPING <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030-4125	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SHELL OIL COMPANY
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WU, XIAOYU <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78726	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) AMAZON
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WUKASCH, SUSAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WUKASCH, SUSAN <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4559/4629 Rpt: 4562/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WUKASCH, SUSAN <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, CARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COUNTY EMPLOYEE		Employer (See Instructions) HARRIS COUNTY
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, CARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COUNTY EMPLOYEE		Employer (See Instructions) HARRIS COUNTY
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, CARLA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77021	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) COUNTY EMPLOYEE		Employer (See Instructions) HARRIS COUNTY
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, DAN <hr/> Contributor address; City; State; Zip Code SEABROOK, TX 77586	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4560/4629 Rpt: 4563/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, DEBRA <hr/> 6 Contributor address; City; State; Zip Code RICHARDSON, TX 75081	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) VOLUNTEER COORDINATPR		9 Employer (See Instructions) HEART TO HEART HOSPICE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, JOAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DECORATOR		Employer (See Instructions) SELF
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, MARGARET <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYATT, MARGARET <hr/> Contributor address; City; State; Zip Code PALESTINE, TX 75803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYCH, GUY <hr/> Contributor address; City; State; Zip Code CALEDONIA, IL 61011	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4561/4629 Rpt: 4564/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYCH, GUY	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code CALEDONIA, IL 61011		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYCH, GUY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code CALEDONIA, IL 61011		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYCHOR, MINDY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code ROSEMOUNT, MN 55068		
Principal occupation / Job title (See Instructions) ELEMENTARY SCHOOL KITCHEN MANAGER		Employer (See Instructions) ISD 196
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLD, C.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAS VEGAS, NV 89148		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLD, C.	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code LAS VEGAS, NV 89148		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4562/4629 Rpt: 4565/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLD, C. <hr/> 6 Contributor address; City; State; Zip Code LAS VEGAS, NV 89148	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLD, C. <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89148	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLD, C. <hr/> Contributor address; City; State; Zip Code LAS VEGAS, NV 89148	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLIE, CAROLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLIE, CAROLYN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4563/4629 Rpt: 4566/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLL, SUE <hr/> 6 Contributor address; City; State; Zip Code WYLIE, TX 75098	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) SALES REP		9 Employer (See Instructions) DORIS SANDERS LTD
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLLIE, EVERETT DAVID <hr/> Contributor address; City; State; Zip Code WACO, TX 76710	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) LETTER CARRIER		Employer (See Instructions) EVERETT WYLLIE
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLLIE, PAMELA <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYLLIE, PAMELA <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER <hr/> Contributor address; City; State; Zip Code HUMBLE, TX 77396	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4564/4629 Rpt: 4567/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HUMBLE, TX 77396		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BRIGHT FUTURES
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HUMBLE, TX 77396		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4565/4629 Rpt: 4568/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, ESTER	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HUMBLE, TX 77396		
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) BRIGHT FUTURES
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, SHEA	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78702		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) FACEBOOK
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, TAMA	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNN, TONI	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code PHILADELPHIA, PA 19143		
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) TONI WYNN
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNNE, ABIGAIL	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code HOUSTON, TX 77057		
Principal occupation / Job title (See Instructions) SELF		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4566/4629 Rpt: 4569/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYNNE, ANNE <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78746	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) WYNNE & WYNNE, AUSTIN
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WYSKOCIL, STEVE <hr/> Contributor address; City; State; Zip Code WEST HILLS, CA 91307	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XIAO, YALE <hr/> Contributor address; City; State; Zip Code ALPHARETTA, GA 30005	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) MORTGAGE BROKER		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XIE, BING <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75229	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) CORPORATE EXECUTIVE		Employer (See Instructions) PUBLIC COMPANY
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XIE, JAN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EDITOR		Employer (See Instructions) JIANS TV LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4567/4629 Rpt: 4570/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XIE, SELENA <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78721	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) PARAMEDIC		9 Employer (See Instructions) ATCEMS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XU, JUNE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ARTIST		Employer (See Instructions) SELF EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Y, KIMBERLEY <hr/> Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Y, VICKIE <hr/> Contributor address; City; State; Zip Code SALEM, OR 97302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YACKLE, CRIS <hr/> Contributor address; City; State; Zip Code EUREKA SPRINGS, AR 72632	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4568/4629 Rpt: 4571/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YACKLE, CRIS <hr/> 6 Contributor address; City; State; Zip Code EUREKA SPRINGS, AR 72632	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YACQUES, RYAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) PM		Employer (See Instructions) ALLIED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAEGER, SUZANNE <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75244	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAFFE, JOAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAGER, WILSON <hr/> Contributor address; City; State; Zip Code CORINTH, TX 76210	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4569/4629 Rpt: 4572/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAGER, WILSON <hr/> 6 Contributor address; City; State; Zip Code CORINTH, TX 76210	7 Amount of Contribution (\$) \$42.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAGJIAN, MARC <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VENTURE CAPITAL		Employer (See Instructions) ORIGIN PARTNERS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAN, GUANG <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BANK OF AMERICA
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAN, GUANG <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) BANK OF AMERICA
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANAMANDALA, RAVI <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) GEOTEST ENGINEERING, INC.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4570/4629 Rpt: 4573/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANAMANDALA, RAVI <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$2,544.00
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) GEOTEST ENGINEERING, INC.
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCEY, GARRETT <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79912	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ASSISTANT GENERAL COUNSEL		Employer (See Instructions) JOBE MATERIALS, LP
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78765	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4571/4629 Rpt: 4574/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78765		
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4572/4629 Rpt: 4575/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	7 Amount of Contribution (\$) \$27.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78765		
8 Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		9 Employer (See Instructions) KOOP RADIO 91.7 FM
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4573/4629 Rpt: 4576/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78765		
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$27.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4574/4629 Rpt: 4577/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78765		
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		Employer (See Instructions) KOOP RADIO 91.7 FM
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code AUSTIN, TX 78765		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4575/4629 Rpt: 4578/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78765	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VOLUNTEER & EVENTS COORDINATOR		9 Employer (See Instructions) KOOP RADIO 91.7 FM
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANCY, MAX <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78765	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) PLUM CREEK RECORDS & TAPES
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANDELL, BRUCE <hr/> Contributor address; City; State; Zip Code ROCKLIN, CA 95765	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CUBIZM
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANDELL, BRUCE <hr/> Contributor address; City; State; Zip Code ROCKLIN, CA 95765	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) CUBIZM
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANEZ, CLAUDIA <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) SUNPOWER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4576/4629 Rpt: 4579/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANEZ, CLAUDIA <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR		9 Employer (See Instructions) SUNPOWER
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, ALLEN <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60625	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BUSINESS ANALYST		Employer (See Instructions) NORTHWESTERN UNIVERSITY
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, ANDREA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) MONTGOMERY COUNTY TX
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, ANDREA <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) MONTGOMERY COUNTY TX
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, DEQING <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77036	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) INSURANCE AGENT		Employer (See Instructions) ALLWIN INSURANCE AGENCY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4577/4629 Rpt: 4580/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, JOE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) PRICING PROFESSIONAL		9 Employer (See Instructions) CBB
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, LIU <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ECONOMIST		Employer (See Instructions) SANTANDER
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, MINWEN <hr/> Contributor address; City; State; Zip Code ELMHURST, NY 11373	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COMMUNITY		Employer (See Instructions) NEW YORK STATE SENATE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, SIXIAN <hr/> Contributor address; City; State; Zip Code ENGLEWOOD, CO 80113	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) ANALYST		Employer (See Instructions) SILVER EAGLE TECHNOLOGY
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, STRINGNER <hr/> Contributor address; City; State; Zip Code SAN GABRIEL, CA 91775	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4578/4629 Rpt: 4581/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, VIVIAN	7 Amount of Contribution (\$) \$524.00
6 Contributor address; City; State; Zip Code HAMILTON, MT 59840		
8 Principal occupation / Job title (See Instructions) LIBRARY ASSISTANT		9 Employer (See Instructions) BITTERROOT PUBLIC LIBRARY
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG, XIAOMENG	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code AUSTIN, TX 78724		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANG-DUQUEZ, ESTHER	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code ENUMCLAW, WA 98022		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANTA, JENNIFER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANTA, JENNIFER	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4579/4629 Rpt: 4582/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANTIS, BARBARA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77025	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANTIS, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANTIS, BARBARA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YANTIS, BLAKE <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78231	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) MOSAIC LAND DEVELOPMENT
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBOROUGH, CHARITY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BROKER		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4580/4629 Rpt: 4583/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBOROUGH, CHARITY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77027	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BROKER		9 Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBOROUGH, MELISSA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) LEARNING INSTITUTE OF TEXAS
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) JOHN JAY COLLEGE OF CRIMINAL JUSTICE
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) JOHN JAY COLLEGE OF CRIMINAL JUSTICE
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, MICHAEL <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) JOHN JAY COLLEGE OF CRIMINAL JUSTICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4581/4629 Rpt: 4584/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, THAD <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77386	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) NONE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, THAD <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, THAD <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, THAD <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARGEAU, DONNA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4582/4629 Rpt: 4585/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARGEAU, DONNA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARNALL, TOM <hr/> Contributor address; City; State; Zip Code WHITE PLAINS, NY 10605	Amount of Contribution (\$) \$10.25
Principal occupation / Job title (See Instructions) PROFESSOR, SCHOLAR		Employer (See Instructions) COLUMBIA UNIVERSITY
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARYAN, JESS <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YATES, CAITY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YATES, CAITY <hr/> Contributor address; City; State; Zip Code SAN FRANCISCO, CA 94115	Amount of Contribution (\$) \$2.86
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4583/4629 Rpt: 4586/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YATES, MARY <hr/> 6 Contributor address; City; State; Zip Code GILROY, CA 95020	7 Amount of Contribution (\$) \$25.25
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YATES, SCOTT <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093-8174	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) INTERNAL MEDICINE		Employer (See Instructions) CENTER FOR EXECUTIVE MEDICINE
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YATES, SUE TODD <hr/> Contributor address; City; State; Zip Code FREELAND, WA 98249-9481	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAODES, RON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YAZELL, DOUGLAS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77058	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4584/4629 Rpt: 4587/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YBARRA, JAY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78213	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) LEGAL		9 Employer (See Instructions) LEGAL
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YE, MING <hr/> Contributor address; City; State; Zip Code TALLAHASSEE, FL 32312	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) FLORIDA STATE UNIVERSITY
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEAGLEY, STEVEN <hr/> Contributor address; City; State; Zip Code PHILADELPHIA, PA 19107-4561	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) STATE FARM
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEAMANS, PAULA <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78254	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEAROUT, CODY <hr/> Contributor address; City; State; Zip Code MESQUITE, TX 75150	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) TRANSPORTATION ENGINEER		Employer (See Instructions) TXDOT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4585/4629 Rpt: 4588/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YECK, RONALD <hr/> 6 Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED (RETIRED)		9 Employer (See Instructions) RETIRED
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YECK, RONALD <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED (RETIRED)		Employer (See Instructions) RETIRED
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YECK, RONALD <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED (RETIRED)		Employer (See Instructions) RETIRED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEE, GARY <hr/> Contributor address; City; State; Zip Code OAKLAND, CA 94619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEE, SAMUEL <hr/> Contributor address; City; State; Zip Code BARNSTABLE, MA 02632	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4586/4629 Rpt: 4589/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEE, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code EVANSTON, IL 60201	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YELLEN, TRACY <hr/> Contributor address; City; State; Zip Code EL PASO, TX 79902	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YELLIN, DOROTHY <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YELLIN, DOROTHY <hr/> Contributor address; City; State; Zip Code SAN DIEGO, CA 92130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEO, CARA M <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PETCONOMY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4587/4629 Rpt: 4590/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEO, CARA M <hr/> 6 Contributor address; City; State; Zip Code ROCKWALL, TX 75087	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) PETCONOMY		9 Employer (See Instructions) SELF
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEO, CARA M <hr/> Contributor address; City; State; Zip Code ROCKWALL, TX 75087	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PETCONOMY		Employer (See Instructions) SELF
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEOMAN, LYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEOMAN, LYNN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEOMAN-LOMANGINO, SARAH <hr/> Contributor address; City; State; Zip Code SANGER, TX 76266	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) CLINIC MANAGER		Employer (See Instructions) DENTON COUNTY MHMR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4588/4629 Rpt: 4591/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YEOMAN-LOMANGINO, SARAH <hr/> 6 Contributor address; City; State; Zip Code SANGER, TX 76266	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) CLINIC MANAGER		9 Employer (See Instructions) DENTON COUNTY MHMR
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YERBY, BARBARA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YERBY, BARBARA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YERBY, BARBARA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YERBY, BARBARA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4589/4629 Rpt: 4592/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YERBY, BARBARA <hr/> 6 Contributor address; City; State; Zip Code TAYLOR, TX 76574	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YERBY, BARBARA <hr/> Contributor address; City; State; Zip Code TAYLOR, TX 76574	Amount of Contribution (\$) \$20.22
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YI, ALICE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YILDIRIM, YETKIN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78728	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) DIRECTOR		Employer (See Instructions) RICE UNIVERSITY
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YINGLING, TERRY <hr/> Contributor address; City; State; Zip Code NEWBURY PARK, CA 91320	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) OFFICE MANAGER		Employer (See Instructions) DRS HANZELIK & HORTON

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4590/4629 Rpt: 4593/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOAK, KIMBERLY <hr/> 6 Contributor address; City; State; Zip Code STOW, OH 44224	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions) KIMBERLY YOAK
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOES, EVAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOES, EVAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOES, EVAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOES, EVAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4591/4629 Rpt: 4594/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOES, EVAN <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOES, EVAN <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YON, JAMES <hr/> Contributor address; City; State; Zip Code STARR, SC 29684	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) FIRST QUALITY TISSUE SE
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YON, JAMES <hr/> Contributor address; City; State; Zip Code STARR, SC 29684	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) TECHNICIAN		Employer (See Instructions) FIRST QUALITY TISSUE SE
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, BYRON <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77030	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4592/4629 Rpt: 4595/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, CLINT <hr/> 6 Contributor address; City; State; Zip Code BELTON, TX 76513	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) EDUCATION		9 Employer (See Instructions) BELTON ISD
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, CLINT <hr/> Contributor address; City; State; Zip Code BELTON, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) BELTON ISD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, JENNIFER <hr/> Contributor address; City; State; Zip Code BRENTWOOD, TN 37027	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) MODEA
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, JENNIFER <hr/> Contributor address; City; State; Zip Code BRENTWOOD, TN 37027	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) MODEA
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, JENNIFER <hr/> Contributor address; City; State; Zip Code BRENTWOOD, TN 37027	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PROJECT MANAGER		Employer (See Instructions) MODEA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4593/4629 Rpt: 4596/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORKE, REBECCA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77019	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) METHODIST PHYSICIANS ORGANIZATION
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, ADRIENNE <hr/> Contributor address; City; State; Zip Code SEWICKLEY, PA 15143-0093	Amount of Contribution (\$) \$54.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, BARBARA <hr/> Contributor address; City; State; Zip Code CENTREVILLE, MD 21617	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) THERAPIST		Employer (See Instructions) SELF EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, CHARLES <hr/> Contributor address; City; State; Zip Code TAOS, NM 87571-9528	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, CHARLES <hr/> Contributor address; City; State; Zip Code TAOS, NM 87571-9528	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4594/4629 Rpt: 4597/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, KAY <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) PROFESSOR		9 Employer (See Instructions) UCSB
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, KAY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UCSB
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, KAY <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78202	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) UCSB
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, KELLYN <hr/> Contributor address; City; State; Zip Code LAWRENCE, KS 66049	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) MEDICAL CODER		Employer (See Instructions) BAYLOR SCOTT AND WHITE
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, KELLYN <hr/> Contributor address; City; State; Zip Code LAWRENCE, KS 66049	Amount of Contribution (\$) \$1.43
Principal occupation / Job title (See Instructions) MEDICAL CODER		Employer (See Instructions) BAYLOR SCOTT AND WHITE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4595/4629 Rpt: 4598/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, L.S.	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code TEMPLE, TX 76501		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, LERIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CONROE, TX 77304		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) OFFICEMAX
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, LERIN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CONROE, TX 77304		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) OFFICEMAX
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, LINDA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AUSTIN, TX 78754		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, PATSY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code COUPLAND, TX 78615		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4596/4629 Rpt: 4599/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, PATSY <hr/> 6 Contributor address; City; State; Zip Code COUPLAND, TX 78615	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, RAMONA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALL SAINTS EPISCOPAL SCHOOL
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, RAMONA <hr/> Contributor address; City; State; Zip Code BEAUMONT, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) ALL SAINTS EPISCOPAL SCHOOL
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, RASHID <hr/> Contributor address; City; State; Zip Code HOMER, LA 71040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, SHARON <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75220	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) QUADRANT HOLDINGS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4597/4629 Rpt: 4600/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, SHARON <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75220	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) INVESTOR		9 Employer (See Instructions) QUADRANT HOLDINGS
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, SUSAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, SUSAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, SUSAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG-ESPARZA, RENEE <hr/> Contributor address; City; State; Zip Code PHOENIX, AZ 85041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) DEER VALLEY UNIFIED DISTRICT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4598/4629 Rpt: 4601/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG-ESPARZA, RENEE	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code PHOENIX, AZ 85041		
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) DEER VALLEY UNIFIED DISTRICT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBERG, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DENTON, TX 76208		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) GREEN & MILLER PC
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBERG, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DENTON, TX 76208		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) GREEN & MILLER PC
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBERG, JENNIFER	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code DENTON, TX 76208		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) GREEN & MILLER PC
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBLOOD, CLAY	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4599/4629 Rpt: 4602/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBLOOD, CLAY <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBLOOD, CLAY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBLOOD, CLAY <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGBLOOD, THERESA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNGERMAN, BRETT <hr/> Contributor address; City; State; Zip Code BALTIMORE, MD 21218	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) EDUCATION		Employer (See Instructions) LOYOLA UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4600/4629 Rpt: 4603/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNT, RICHARD <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77098	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) SELF-EMPLOYED		9 Employer (See Instructions) SELF
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOVONIE, DARLENE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOVONIE, DARLENE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOVONIE, DARLENE <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76010	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOW, ELIZABETH <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) COMMUNITY ENGAGED INTERN		Employer (See Instructions) SOUTHWESTERN UNIVERSITY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4601/4629 Rpt: 4604/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOW, ELIZABETH	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77005		
8 Principal occupation / Job title (See Instructions) COMMUNITY ENGAGED INTERN		9 Employer (See Instructions) SOUTHWESTERN UNIVERSITY
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YSASI, MILINDA	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49505		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) GROW
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YU, GARY	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code BRAINTREE, MA 02184		
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) LIEPIN NORTH AMERICAN
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YU, JOEL	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code AUSTIN, TX 78739		
Principal occupation / Job title (See Instructions) ENERGY POLICY		Employer (See Instructions) ENCHANTED ROCK, LLC.
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YU, YUNFAN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78750		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) SAMBANOVA SYSTEMS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4602/4629 Rpt: 4605/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUAN, JASON <hr/> 6 Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUAN, JASON <hr/> Contributor address; City; State; Zip Code PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUAN, WEN <hr/> Contributor address; City; State; Zip Code SAN JOSE, CA 95129	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) VALLEY SPRINGS EDUCATION
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUAN, WENBIN <hr/> Contributor address; City; State; Zip Code BROOKFIELD, WI 53005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUHAS, PAULINE <hr/> Contributor address; City; State; Zip Code WATERVILLE, WA 98858	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4603/4629 Rpt: 4606/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUHAS, PAULINE <hr/> 6 Contributor address; City; State; Zip Code WATERVILLE, WA 98858	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YURASEK, KELLY <hr/> Contributor address; City; State; Zip Code OAK PARK, IL 60304	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YURGAITES, CHRISTINE <hr/> Contributor address; City; State; Zip Code VERO BEACH, FL 32966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YURGAITES, CHRISTINE <hr/> Contributor address; City; State; Zip Code VERO BEACH, FL 32966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YURGAITES, CHRISTINE <hr/> Contributor address; City; State; Zip Code VERO BEACH, FL 32966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4604/4629 Rpt: 4607/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUSUF, JESSICA <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) TECHNICAL WRITER		9 Employer (See Instructions) JTD
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUSUF, JESSICA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) JTD
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUSUF, JESSICA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) WRITER		Employer (See Instructions) SELF
Date 11/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUSUF, JESSICA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) JTD
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YUSUF, JESSICA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) TECHNICAL WRITER		Employer (See Instructions) JTD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4605/4629 Rpt: 4608/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YZAGUIRRE, MARK <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77055	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions) UNIVERSITY OF HOUSTON
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZABRISKIE, MICHELLE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZABRISKIE, MICHELLE <hr/> Contributor address; City; State; Zip Code GEORGETOWN, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACH, STEVEN <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) LIBRARIAN		Employer (See Instructions) CITY OF PASADENA
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHARIAH, SHONE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) DELL TECHNOLOGIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4606/4629 Rpt: 4609/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHARIAH, SHONE	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78759		
8 Principal occupation / Job title (See Instructions) PROGRAM MANAGER		9 Employer (See Instructions) DELL TECHNOLOGIES
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHARIAS, NICHOLAS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code BELLAIRE, TX 77401		
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) UTHEALTH
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHARY, ANDREW	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code STAMFORD, CT 06905		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHRISON, KENDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STDAVIDS NAMC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZACHRISON, KENDRA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) STDAVIDS NAMC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4607/4629 Rpt: 4610/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAHEDANI, DULCE <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77096	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) VERITEX COMMUNITY BANK
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAHEDANI, DULCE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) VERITEX COMMUNITY BANK
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAHEDI-SPUNG, LEILAH <hr/> Contributor address; City; State; Zip Code DENVER, CO 80238	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) COLORADO
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAHRN, SANDRA LEE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAJA, GERTRUDE <hr/> Contributor address; City; State; Zip Code STREAMWOOD, IL 60107	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4608/4629 Rpt: 4611/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMARRIPA, LINDA <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$31.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORA, SANTIAGO <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) EXXONMOBIL
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORA, STEPHANIE <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER, ADMINISTRATOR		Employer (See Instructions) THEORY HEALTH MEDICAL CLINIC
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORA, STEPHANIE <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER, ADMINISTRATOR		Employer (See Instructions) THEORY HEALTH MEDICAL CLINIC
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORA, WREN <hr/> Contributor address; City; State; Zip Code KATY, TX 77449	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4609/4629 Rpt: 4612/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORANO, WANDA <hr/> 6 Contributor address; City; State; Zip Code IRVING, TX 75063	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORANO, WANDA <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORANO, WANDA <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORANO, WANDA <hr/> Contributor address; City; State; Zip Code IRVING, TX 75063	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZANNER, MARY ANN <hr/> Contributor address; City; State; Zip Code PLACITAS, NM 87043	Amount of Contribution (\$) \$13.32
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4610/4629 Rpt: 4613/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAPAROLLI, STEPHAN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78705	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARATE, ANDREA <hr/> Contributor address; City; State; Zip Code LEANDER, TX 78641	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARATE, ESTEVAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACTOR		Employer (See Instructions) SELF
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARATE, ESTEVAN <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ACTOR		Employer (See Instructions) SELF
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARDIACKAS, VICKI <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4611/4629 Rpt: 4614/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARINKELK, GITI	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code SPRING, TX 77380		
8 Principal occupation / Job title (See Instructions) ENGINEER/OWNER		9 Employer (See Instructions) ZARINKELK ENGINEERING
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARINKELK, GITI	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code SPRING, TX 77380		
Principal occupation / Job title (See Instructions) ENGINEER/OWNER		Employer (See Instructions) ZARINKELK ENGINEERING
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZARRABI, SAAM	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code IRVING, TX 75038		
Principal occupation / Job title (See Instructions) DENTIST		Employer (See Instructions) RODEO DENTAL
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZATYKO, STEVEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code COPPELL, TX 75019		
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZATYKO, STEVEN	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code COPPELL, TX 75019		
Principal occupation / Job title (See Instructions) IT CONSULTANT		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4612/4629 Rpt: 4615/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZATYKO, STEVEN <hr/> 6 Contributor address; City; State; Zip Code COPPELL, TX 75019	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) IT CONSULTANT		9 Employer (See Instructions) SELF
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAUHAR, JONI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) DELL CHILDRENS / ASCENSION/ UT
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAUHAR, JONI <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		Employer (See Instructions) DELL CHILDRENS / ASCENSION/ UT
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVADA, KATHERINE <hr/> Contributor address; City; State; Zip Code BURLINGTON, WI 53105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVADA, KATHERINE <hr/> Contributor address; City; State; Zip Code BURLINGTON, WI 53105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4613/4629 Rpt: 4616/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVADA, KATHERINE	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code BURLINGTON, WI 53105		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVADA, KATHERINE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code BURLINGTON, WI 53105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVADA, KATHERINE	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BURLINGTON, WI 53105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVADA, KATHERINE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code BURLINGTON, WI 53105		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVALA, AMY	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code FRITCH, TX 79036		
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) CPCHEM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4614/4629 Rpt: 4617/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVISCH, TERESA <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78249	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAVON, XIAOJIE <hr/> Contributor address; City; State; Zip Code CINCINNATI, OH 45229	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) GOLDEN NEXUS GROUP
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAWITKOWSKI, ERNESTINE <hr/> Contributor address; City; State; Zip Code CYPRESS, TX 77429	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAYAN, AZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LOOP
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAYAN, AZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LOOP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4615/4629 Rpt: 4618/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAYAN, AZ <hr/> 6 Contributor address; City; State; Zip Code DALLAS, TX 75248	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		9 Employer (See Instructions) LOOP
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAYAN, AZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LOOP
Date 12/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAYAN, AZ <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) LOOP
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAYAS, CARMEN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEECK, STEPHEN <hr/> Contributor address; City; State; Zip Code CEDAR PARK, TX 78613-5374	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4616/4629 Rpt: 4619/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEFTEL, PETER <hr/> 6 Contributor address; City; State; Zip Code MINNEAPOLIS, MN 55407	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEIDMAN, MARK <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) FBFK
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEIS, MATT <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) VICE PRESIDENT		Employer (See Instructions) WATERMAN STEELE REAL ESTATE ADVISORS
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEITLIN, CARY <hr/> Contributor address; City; State; Zip Code VALLEJO, CA 94592	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SCIENTIST		Employer (See Instructions) LEIDOS
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEITLIN, JUNE <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11201	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4617/4629 Rpt: 4620/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEITLIN, JUNE <hr/> 6 Contributor address; City; State; Zip Code BROOKLYN, NY 11201	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEMBOW, GARY <hr/> Contributor address; City; State; Zip Code SANTA MONICA, CA 90404	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) TECH CONSULTANT		Employer (See Instructions) SELF
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEMEL, BROOK <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEMEL, BROOK <hr/> Contributor address; City; State; Zip Code BOERNE, TX 78006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEMSKY, JONATHAN <hr/> Contributor address; City; State; Zip Code SPRINGFIELD, IL 62712	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		Employer (See Instructions) ROCHESTER 3A SCHOOLS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4618/4629 Rpt: 4621/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEMSKY, JONATHAN <hr/> 6 Contributor address; City; State; Zip Code SPRINGFIELD, IL 62712	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) OCCUPATIONAL THERAPIST		9 Employer (See Instructions) ROCHESTER 3A SCHOOLS
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZENG, HUI <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) HUI ZENG
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZENT, GRACIE <hr/> Contributor address; City; State; Zip Code ALPINE, TX 79830	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEPECKI, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HEALTH INSURANCE		Employer (See Instructions) CIGNA
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZEPEDA, EDGAR <hr/> Contributor address; City; State; Zip Code LYNNWOOD, WA 98036	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) CLEAN		Employer (See Instructions) CLEANER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4619/4629 Rpt: 4622/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZERMENO, ROY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77013	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, ALEC <hr/> Contributor address; City; State; Zip Code SOUTHLAKE, TX 76092	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) RESEARCH		Employer (See Instructions) UT SOUTHWESTERN
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, HEIDI <hr/> Contributor address; City; State; Zip Code SAN MATEO, CA 94404	Amount of Contribution (\$) \$288.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) INDEED
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, JINGWEN <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) PARKLAND
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, SHUXING <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) RESEARCHER		Employer (See Instructions) UNIVERSITY OF HAWAII CANCER CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4620/4629 Rpt: 4623/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, XIAOMAN <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77581	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) WEB DEVELOPER		9 Employer (See Instructions) UNIVERSITY OF HOUSTON CLEAR LAKE
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, YI <hr/> Contributor address; City; State; Zip Code KELLER, TX 76248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TECHNOLOGY		Employer (See Instructions) IDONTWANTTOSAY
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, YINGCHAO <hr/> Contributor address; City; State; Zip Code PRINCETON JUNCTION, NJ 08550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) EXECUTIVE		Employer (See Instructions) AYR, INC.
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, YUNPENG (JACK) <hr/> Contributor address; City; State; Zip Code MAGNOLIA, TX 77354	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) ASSOCIATE PROFESSOR		Employer (See Instructions) UNI. OF HOUSTON
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, ZE <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) PREFERNOTTOSAY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4621/4629 Rpt: 4624/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHANG, ZHENG <hr/> 6 Contributor address; City; State; Zip Code SANFORD, FL 32771	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) REAL ESTATE		9 Employer (See Instructions) BJYX INTERNATIONAL LLC
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHAO, CJ <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ECONOMIST		Employer (See Instructions) AMHERST
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHAO, XINMIAO <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHAO, YOUSHAN <hr/> Contributor address; City; State; Zip Code OVIEDO, FL 32765	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) FAAJA		Employer (See Instructions) FAAJA
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHAO, YOUSHAN <hr/> Contributor address; City; State; Zip Code OVIEDO, FL 32765	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) FAAJA		Employer (See Instructions) FAAJA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4622/4629 Rpt: 4625/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHENG, LIYUN <hr/> 6 Contributor address; City; State; Zip Code TROY, MI 48098	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) SELF EMPLOYED		9 Employer (See Instructions) WESTING BRIDGE
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHOU, FUGANG <hr/> Contributor address; City; State; Zip Code NAPLES, FL 34104	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) SIGNS NOW
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHU, KELIANG <hr/> Contributor address; City; State; Zip Code PLEASANTON, CA 94588	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) DEHENG LAW OFFICES
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZHU, LING <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SOFTWARE ENGINEER		Employer (See Instructions) COENTERPRISE
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZICHER, KATHY <hr/> Contributor address; City; State; Zip Code NILES, IL 60714	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4623/4629 Rpt: 4626/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZICHER, KATHY <hr/> 6 Contributor address; City; State; Zip Code NILES, IL 60714	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIEGAST, ERIC <hr/> Contributor address; City; State; Zip Code ENCINITAS, CA 92024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) INTERNET ENGINEER		Employer (See Instructions) DOMAINTOOLS LLC
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIEGER, JON <hr/> Contributor address; City; State; Zip Code REDMOND, WA 98053	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIELSKE, REV. JONATHAN <hr/> Contributor address; City; State; Zip Code SAINT PAUL, MN 55105	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) MINISTER		Employer (See Instructions) HOLY CROSS LUTHERAN CHURCH
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZILLMER, DEBRA <hr/> Contributor address; City; State; Zip Code MADISON, WI 53703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4624/4629 Rpt: 4627/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIMMERMAN, PAMELA <hr/> 6 Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIMMERMAN, PAMELA <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIMMERMAN, PAMELA <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIMMERMAN, PAMELA <hr/> Contributor address; City; State; Zip Code SANTA ROSA, CA 95404	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZINDERMAN, DANA <hr/> Contributor address; City; State; Zip Code LOS ANGELES, CA 90024	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4625/4629 Rpt: 4628/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZINN, ROBERT L <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) OIL & GAS PRODUCTION		9 Employer (See Instructions) SELF
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZINTZ, MARJI <hr/> Contributor address; City; State; Zip Code OLIVEBRIDGE, NY 12461	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZINTZ, MARJI <hr/> Contributor address; City; State; Zip Code OLIVEBRIDGE, NY 12461	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZIRKIN, STEPHANIE <hr/> Contributor address; City; State; Zip Code GREENBELT, MD 20770	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZITO, KIMBERLY <hr/> Contributor address; City; State; Zip Code MYRTLE BEACH, SC 29588	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) SOFTWARE DEVELOPER		Employer (See Instructions) FIELD NATION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4626/4629 Rpt: 4629/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZOGLO, REGINA <hr/> 6 Contributor address; City; State; Zip Code WHEAT RIDGE, CO 80033	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZORICH, ROBERT <hr/> Contributor address; City; State; Zip Code BROOKHAVEN, GA 30319	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZORICH, ROBERT <hr/> Contributor address; City; State; Zip Code BROOKHAVEN, GA 30319	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZORICH, ROBERT <hr/> Contributor address; City; State; Zip Code BROOKHAVEN, GA 30319	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZOU, HUIYUAN <hr/> Contributor address; City; State; Zip Code PLANO, TX 75025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) FINANCIAL ANALYSIS		Employer (See Instructions) DTCC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4627/4629 Rpt: 4630/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZOUTENDYK, JENIFER	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code OCEANSIDE, CA 92054		
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUCCO, FRANK	Amount of Contribution (\$) \$3.83
Contributor address; City; State; Zip Code CASTLE ROCK, CO 80104		
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) WANCO, INC.
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUCCO, FRANK	Amount of Contribution (\$) \$3.83
Contributor address; City; State; Zip Code CASTLE ROCK, CO 80104		
Principal occupation / Job title (See Instructions) SALES MANAGER		Employer (See Instructions) WANCO, INC.
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUCKERMAN, WENDY	Amount of Contribution (\$) \$24.00
Contributor address; City; State; Zip Code BROOKLYN, NY 11215		
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUMETA, ZENA	Amount of Contribution (\$) \$20.24
Contributor address; City; State; Zip Code ANN ARBOR, MI 48105		
Principal occupation / Job title (See Instructions) MEDIATOR		Employer (See Instructions) MTCI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4628/4629 Rpt: 4631/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZUMWALT, FRANCES 6 Contributor address; City; State; Zip Code EL CAJON, CA 92021	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) TEACHER		9 Employer (See Instructions) GROSSMONT UNION HIGH SCHOOL DISTRICT
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZWERNEMANN, ALLEN Contributor address; City; State; Zip Code HOUSTON, TX 77009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) THE ZWERNEMANN LAW FIRM
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZWIENER, ERIN Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) AUTHOR		Employer (See Instructions) SELF
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZYLBERFUDEN, MARK Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) PC TECH
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZYLBERFUDEN, MARK Contributor address; City; State; Zip Code MCGREGOR, TX 76657	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SELF-EMPLOYED		Employer (See Instructions) PC TECH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4629/4629 Rpt: 4632/5559
2 FILER NAME ActBlue Texas		3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZYMOWSKI, ROBYN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78749	7 Amount of Contribution (\$) \$12.50
8 Principal occupation / Job title (See Instructions) MENTAL HEALTH COUNSELOR		9 Employer (See Instructions) SELF

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name A BETTER HAYS PAC
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6 Amount (\$) \$2.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7038 WASHITA WAY SAN ANTONIO, TX 78256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name A BETTER HAYS PAC
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Amount (\$) \$2.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7038 WASHITA WAY SAN ANTONIO, TX 78256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name ABBRUZZESE, LAURA
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Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 BOSQUE BLVD UNIT 403 WACO, TX 76707
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ACCESS EDUCATION
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6 Amount (\$) \$1,027.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ACCESS EDUCATION
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ACCESS EDUCATION
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Amount (\$) \$121.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name ACCESS EDUCATION
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6 Amount (\$) \$91.22	7 Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ACCESS EDUCATION
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Amount (\$) \$2,045.84	Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ACCESS EDUCATION
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Amount (\$) \$14.40	Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ACCESS EDUCATION
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6 Amount (\$) \$81.63	7 Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ACCESS EDUCATION
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Amount (\$) \$155.56	Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ACCESS EDUCATION
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Amount (\$) \$115.24	Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name ACCESS EDUCATION
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6 Amount (\$) \$48.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8629 SEA ASH CIRCLE ROUND ROCK, TX 78681
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$23,439.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/28/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$135.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/29/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$128.35 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$700.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$681.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name ACTBLUE TECHNICAL SERVICES	
6 Amount (\$) \$21,616.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name ACTBLUE TECHNICAL SERVICES	
Amount (\$) \$147.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name ACTBLUE TECHNICAL SERVICES	
Amount (\$) \$1,042.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/06/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$3.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$156.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$4,645.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/11/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$30.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/12/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$56.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$44.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/14/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$37.07	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$3,111.05	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$119.53	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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Expenditure from corporate funds

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Payee name ACTBLUE TECHNICAL SERVICES	
6 Amount (\$) \$92.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/20/2024	Candidate/Officeholder name ACTBLUE TECHNICAL SERVICES	
Amount (\$) \$66.26 <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/21/2024	Candidate/Officeholder name ACTBLUE TECHNICAL SERVICES	
Amount (\$) \$86.09 <input type="checkbox"/> Expenditure from corporate funds	Office sought 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$6,401.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$24.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$59.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/27/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$2.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$186.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$4,159.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/02/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$20.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$25.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$5.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Payee name ACTBLUE TECHNICAL SERVICES	
6 Amount (\$) \$235.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name ACTBLUE TECHNICAL SERVICES	
Amount (\$) \$8,030.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name ACTBLUE TECHNICAL SERVICES	
Amount (\$) \$82.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/10/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$179.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$61.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$523.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$17,343.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$1.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$0.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/19/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$139.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$4,810.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/23/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$1.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/26/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$15.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$1,779.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/30/2024	Payee name ACTBLUE TECHNICAL SERVICES
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Amount (\$) \$0.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name ACTBLUE TECHNICAL SERVICES
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6 Amount (\$) \$2,301.16 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PROCESSING FEE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PROCESSING FEE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ADRIAN GARCIA FOR HARRIS COUNTY PRECINCT TWO
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ADRIAN GARCIA FOR HARRIS COUNTY PRECINCT TWO
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Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name ADRIAN GARCIA FOR HARRIS COUNTY PRECINCT TWO
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ADRIAN GARCIA FOR HARRIS COUNTY PRECINCT TWO
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Amount (\$) \$9,605.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ADRIAN GARCIA FOR HARRIS COUNTY PRECINCT TWO
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Amount (\$) \$5,042.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name ADRIAN GARCIA FOR HARRIS COUNTY PRECINCT TWO
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6 Amount (\$) \$9,662.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ADRIENNE BELL FOR TEXAS
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Amount (\$) \$661.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3519 E. WALNUT #3465 PEARLAND, TX 77588
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ADRIENNE BELL FOR TEXAS
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Amount (\$) \$68.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3519 E. WALNUT #3465 PEARLAND, TX 77588
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name ADRIENNE BELL FOR TEXAS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3519 E. WALNUT #3465 PEARLAND, TX 77588
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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Amount (\$) \$412.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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Amount (\$) \$3,295.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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6 Amount (\$) \$172.87	7 Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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Amount (\$) \$293.90	Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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Amount (\$) \$52.81	Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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6 Amount (\$) \$340.97	7 Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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Amount (\$) \$57.62	Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND
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Amount (\$) \$15.36	Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name AGAVE DEMOCRATIC INFRASTRUCTURE FUND	
6 Amount (\$) \$254.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 50317 AUSTIN, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name AICHA DAVIS FOR TEXAS HD 109	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 10/27/2024	Payee name AICHA DAVIS FOR TEXAS HD 109	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 608 TARA DR DESOTO, TX 75115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name AICHA DAVIS FOR TEXAS HD 109	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 11/24/2024	Payee name AICHA DAVIS FOR TEXAS HD 109	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 608 TARA DR DESOTO, TX 75115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name AICHA DAVIS FOR TEXAS HD 109
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6 Amount (\$) \$960.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 608 TARA DR DESOTO, TX 75115
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name AICHA DAVIS FOR TEXAS HD 109
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Amount (\$) \$1,320.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 608 TARA DR DESOTO, TX 75115
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ALBERT HUNTER 4 HD 13
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Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 263 COUNTY ROAD 2601 P. O. BOX 291 MERIDIAN, TX 76665
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ALBERT HUNTER 4 HD 13
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 263 COUNTY ROAD 2601 P. O. BOX 291 MERIDIAN, TX 76665
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ALBERT HUNTER 4 HD 13
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 263 COUNTY ROAD 2601 P. O. BOX 291 MERIDIAN, TX 76665
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ALBERT ROBERTS CAMPAIGN
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 24615 FORT WORTH, TX 76124
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name ALBERT ROBERTS CAMPAIGN
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 24615 FORT WORTH, TX 76124
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ALBERT ROBERTS CAMPAIGN
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 24615 FORT WORTH, TX 76124
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ALEX VILLALOBOS FOR HAYS COUNTY SHERIFF
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Amount (\$) \$1,070.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 136 FIREWHEEL COVE KYLE, TX 78640
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ALEX VILLALOBOS FOR HAYS COUNTY SHERIFF
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6 Amount (\$) \$110.45	7 Payee address; City; State; Zip Code 136 FIREWHEEL COVE KYLE, TX 78640
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name ALEX VILLALOBOS FOR HAYS COUNTY SHERIFF
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Amount (\$) \$960.50	Payee address; City; State; Zip Code 136 FIREWHEEL COVE KYLE, TX 78640
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ALEX VILLALOBOS FOR HAYS COUNTY SHERIFF
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Amount (\$) \$14.40	Payee address; City; State; Zip Code 136 FIREWHEEL COVE KYLE, TX 78640
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name ALEX VILLALOBOS FOR HAYS COUNTY SHERIFF	
6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 136 FIREWHEEL COVE KYLE, TX 78640	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name ALEX4TEXAS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 509 3RD ST TERRELL, TX 75160	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name ALEX4TEXAS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 509 3RD ST TERRELL, TX 75160	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ALL HAT NO CATTLE PAC
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6 Amount (\$) \$19.20	7 Payee address; City; State; Zip Code 7901 AQUA VISTA DR PLANO, TX 75025
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ALL HAT NO CATTLE PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 7901 AQUA VISTA DR PLANO, TX 75025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ALL HAT NO CATTLE PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 7901 AQUA VISTA DR PLANO, TX 75025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/19/2024	5 Payee name ALLEN-SAVIETTA, CORA	
6 Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 105 WEST SKYVIEW ROAD AUSTIN, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name AMY, AMY	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1539 SERENADA AVE LAS VEGAS, NV 89169	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name AMY, AMY	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1539 SERENADA AVE LAS VEGAS, NV 89169	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name ANA HERNANDEZ CAMPAIGN
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6 Amount (\$) \$393.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 15538 HOUSTON, TX 77220
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ANA HERNANDEZ CAMPAIGN
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Amount (\$) \$1,450.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15538 HOUSTON, TX 77220
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ANA HERNANDEZ CAMPAIGN
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15538 HOUSTON, TX 77220
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ANDERSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1816 PALESTINE, TX 75802
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ANDERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1816 PALESTINE, TX 75802
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ANDERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1816 PALESTINE, TX 75802
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name ANDERSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1816 PALESTINE, TX 75802	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name ANDERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1816 PALESTINE, TX 75802	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name ANDERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1816 PALESTINE, TX 75802	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/04/2024	5 Payee name ANDERSON, GAY-DEE
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 19806 N. ECHO RIM DR. SURPRISE, AZ 85387
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ANDRE LUPER CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3508 SHERMAN, TX 75091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ANDRE LUPER CAMPAIGN
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3508 SHERMAN, TX 75091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 38/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name ANDRE LUPER CAMPAIGN
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3508 SHERMAN, TX 75091
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ANDREW P. MORRIS FOR TEXAS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 16038 FORT WORTH, TX 76162
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ANDREW SOMMERMAN FOR COUNTY COMMISSIONER
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3811 TURTLE CREEK BLVD #1400 DALLAS, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 39/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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6 Amount (\$) \$41.29 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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Amount (\$) \$156.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 40/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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6 Amount (\$) \$60.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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Amount (\$) \$115.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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Amount (\$) \$998.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 41/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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6 Amount (\$) \$730.91 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name ANDY BROWN FOR TRAVIS COUNTY JUDGE
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Amount (\$) \$5,100.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6061 AUSTIN, TX 78762
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ANN JOHNSON CAMPAIGN
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Amount (\$) \$6,540.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 42/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ANN JOHNSON CAMPAIGN
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6 Amount (\$) \$819.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name ANN JOHNSON CAMPAIGN
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Amount (\$) \$490.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ANN JOHNSON CAMPAIGN
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Amount (\$) \$24.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 43/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name ANN JOHNSON CAMPAIGN	
6 Amount (\$) \$1,643.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name ANN JOHNSON CAMPAIGN	
Amount (\$) \$600.31 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/01/2024	Candidate/Officeholder name ANN JOHNSON CAMPAIGN	
Amount (\$) \$353.93 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 44/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ANN JOHNSON CAMPAIGN
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6 Amount (\$) \$5,883.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ANN JOHNSON CAMPAIGN
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Amount (\$) \$44,406.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ANNETTE RAMIREZ CAMPAIGN
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Amount (\$) \$1,018.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 19200 SPACE CENTER BLVD UNIT 2613 HOUSTON, TX 77058
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 45/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ANNETTE RAMIREZ CAMPAIGN
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6 Amount (\$) \$984.51 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 19200 SPACE CENTER BLVD UNIT 2613 HOUSTON, TX 77058
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name ANNETTE RAMIREZ CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 19200 SPACE CENTER BLVD UNIT 2613 HOUSTON, TX 77058
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ANNETTE RAMIREZ CAMPAIGN
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Amount (\$) \$528.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 19200 SPACE CENTER BLVD UNIT 2613 HOUSTON, TX 77058
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 46/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ANNETTE RAMIREZ CAMPAIGN
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6 Amount (\$) \$67.22	7 Payee address; City; State; Zip Code 19200 SPACE CENTER BLVD UNIT 2613 HOUSTON, TX 77058
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ANNETTE RAMIREZ CAMPAIGN
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Amount (\$) \$581.05	Payee address; City; State; Zip Code 19200 SPACE CENTER BLVD UNIT 2613 HOUSTON, TX 77058
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ANNIE'S LIST
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Amount (\$) \$2,738.27	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 47/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ANNIE'S LIST
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6 Amount (\$) \$2,019.77 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ANNIE'S LIST
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Amount (\$) \$1,450.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ANNIE'S LIST
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Amount (\$) \$348.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 48/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name ANNIE'S LIST
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6 Amount (\$) \$1,863.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ANNIE'S LIST
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Amount (\$) \$617.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ANNIE'S LIST
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Amount (\$) \$331.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 49/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name ANNIE'S LIST
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6 Amount (\$) \$533.03	7 Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ANNIE'S LIST
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Amount (\$) \$1,184.48	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ANNIE'S LIST
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Amount (\$) \$566.66	Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 50/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name ANNIE'S LIST
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6 Amount (\$) \$895.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303277 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2024	Payee name ANNUNZIATA, DIANE
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 COTSWOLD NORTH SALEM, NY 10560
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 51/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE	
6 Amount (\$) \$27.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 52/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE	
6 Amount (\$) \$3.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name ARANSAS COUNTY DEMOCRATIC COMMITTEE	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1356 FULTON, TX 78358	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 53/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name AREA 5 DEMOCRATS
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6 Amount (\$) \$874.02	7 Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name AREA 5 DEMOCRATS
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Amount (\$) \$931.67	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name AREA 5 DEMOCRATS
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Amount (\$) \$3,001.54	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 54/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name AREA 5 DEMOCRATS
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name AREA 5 DEMOCRATS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name AREA 5 DEMOCRATS
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Amount (\$) \$72.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 55/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name AREA 5 DEMOCRATS
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6 Amount (\$) \$19.21	7 Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name AREA 5 DEMOCRATS
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Amount (\$) \$854.82	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name AREA 5 DEMOCRATS
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Amount (\$) \$19.21	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 56/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name AREA 5 DEMOCRATS	
6 Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name AREA 5 DEMOCRATS	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 608 PASADENA, TX 77501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name ARMANDO MARTINEZ FOR TEXAS STATE REPRESENTATIVE HOUSE DIST. 39	
Amount (\$) \$3,601.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1651 WESLACO, TX 78596	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 57/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name ARMANDO MARTINEZ FOR TEXAS STATE REPRESENTATIVE HOUSE DIST. 39
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6 Amount (\$) \$3,842.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1651 WESLACO, TX 78596
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ARMANDO WALLE CAMPAIGN
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Amount (\$) \$1,450.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ARMANDO WALLE CAMPAIGN
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Amount (\$) \$1,008.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 58/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name ARMANDO WALLE CAMPAIGN
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ARMANDO WALLE CAMPAIGN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ARMANDO WALLE CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 59/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ARMANDO WALLE CAMPAIGN
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6 Amount (\$) \$576.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ARMANDO WALLE CAMPAIGN
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Amount (\$) \$720.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4826 HOLLYBROOK LANE HOUSTON, TX 77039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ASIAN AMERICAN DEMOCRATS OF TEXAS PAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7719 EHRHARDT LN SUGAR LAND, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 60/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ASIAN AMERICAN DEMOCRATS OF TEXAS PAC
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6 Amount (\$) \$970.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7719 EHRHARDT LN SUGAR LAND, TX 77479
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ASIAN AMERICAN DEMOCRATS OF TEXAS PAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7719 EHRHARDT LN SUGAR LAND, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ASIAN AMERICAN DEMOCRATS OF TEXAS PAC
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7719 EHRHARDT LN SUGAR LAND, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 61/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name ASIAN AMERICAN DEMOCRATS OF TEXAS PAC
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7719 EHRHARDT LN SUGAR LAND, TX 77479
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ASIAN AMERICAN DEMOCRATS OF TEXAS PAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7719 EHRHARDT LN SUGAR LAND, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 62/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 63/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 64/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name ATASCOSA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 522 WILKEY RD POTEET, TX 78065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name AUSTIN ENVIRONMENTAL DEMOCRATS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6112 HIGHLANDALE DR AUSTIN, TX 78731
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name AUSTIN ENVIRONMENTAL DEMOCRATS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6112 HIGHLANDALE DR AUSTIN, TX 78731
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 65/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name AUSTIN ENVIRONMENTAL DEMOCRATS
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6 Amount (\$) \$19.21	7 Payee address; City; State; Zip Code 6112 HIGHLANDALE DR AUSTIN, TX 78731
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name AUSTIN YOUNG DEMOCRATS
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Amount (\$) \$521.54	Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name AUSTIN YOUNG DEMOCRATS
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Amount (\$) \$62.41	Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 66/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name AUSTIN YOUNG DEMOCRATS	
6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name AUSTIN YOUNG DEMOCRATS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name AUSTIN YOUNG DEMOCRATS	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 67/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name AUSTIN YOUNG DEMOCRATS	
6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name AUSTIN YOUNG DEMOCRATS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name AUSTIN YOUNG DEMOCRATS	
Amount (\$) \$28.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 68/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name AUSTIN YOUNG DEMOCRATS	
6 Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2612 PERSEVERANCE DR. APT 1209 AUSTIN, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name AVERIE FOR ALL	
Amount (\$) \$11,490.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name AVERIE FOR ALL	
Amount (\$) \$8,546.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 69/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Payee name AVERIE FOR ALL	
6 Amount (\$) \$1,232.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name AVERIE FOR ALL	
Amount (\$) \$71.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name AVERIE FOR ALL	
Amount (\$) \$113.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 70/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name AVERIE FOR ALL
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6 Amount (\$) \$364.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name AVERIE FOR ALL
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Amount (\$) \$409.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name AVERIE FOR ALL
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Amount (\$) \$63.71 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 71/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name AVERIE FOR ALL
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6 Amount (\$) \$23.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 401 MIDDLE CREEK BUDA, TX 78610
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name AVOW PAC
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1101 W 34TH ST #679 AUSTIN, TX 78705-1907
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name AVOW PAC
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1101 W 34TH ST #679 AUSTIN, TX 78705-1907
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 72/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name AVOW PAC
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6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1101 W 34TH ST #679 AUSTIN, TX 78705-1907
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name AVOW PAC
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Amount (\$) \$115.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1101 W 34TH ST #679 AUSTIN, TX 78705-1907
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name BAILEY, ABENAA
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Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4711 LJ PARKWAY UNIT 4208 SUGAR LAND, TX 77479-0001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 73/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name BARBARA GERVIN-HAWKINS CAMPAIGN	
6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 18659 SAN ANTONIO, TX 78218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name BARBARA GERVIN-HAWKINS CAMPAIGN	
Amount (\$) \$1,440.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 18659 SAN ANTONIO, TX 78218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY	
Amount (\$) \$153.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 74/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BASTROP COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$115.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY
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Amount (\$) \$288.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 75/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name BASTROP COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY
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Amount (\$) \$235.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY
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Amount (\$) \$148.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 76/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name BASTROP COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$91.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BASTROP COUNTY DEMOCRATIC PARTY
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Amount (\$) \$144.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 77/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name BASTROP COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 282 POPE BEND SOUTH CEDAR CREEK, TX 78612	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name BAUTISTA, 45 HENSLEY ST	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 45 HENSLEY ST SAN JOSE, CA 95112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 78/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/28/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$67.22	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$168.08	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$76.81	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 79/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/04/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 80/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT	
6 Amount (\$) \$105.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$124.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$192.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 81/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/13/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$38.41	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$38.41	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$48.01	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 82/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/18/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/20/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 83/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/21/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$182.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$91.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 84/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/26/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$144.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 85/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$288.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$355.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$139.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 86/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/04/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$134.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/05/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$240.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$187.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 87/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/09/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT	
6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 88/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/12/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 89/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/18/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT	
6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
<input type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$120.05	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/23/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT	
Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 90/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name BAY AREA DEMOCRATIC MOVEMENT
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/30/2024	Payee name BAY AREA DEMOCRATIC MOVEMENT
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 590383 HOUSTON, TX 77259
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BAY AREA NEW DEMOCRATS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 890381 HOUSTON, TX 77289-0381
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 91/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name BAY AREA NEW DEMOCRATS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 890381 HOUSTON, TX 77289-0381
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BAYOU BLUE DEMOCRATS
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Amount (\$) \$57.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BAYOU BLUE DEMOCRATS
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 92/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name BAYOU BLUE DEMOCRATS
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6 Amount (\$) \$76.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BAYOU BLUE DEMOCRATS
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BAYOU BLUE DEMOCRATS
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Amount (\$) \$451.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 93/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name BAYOU BLUE DEMOCRATS
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6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BAYOU BLUE DEMOCRATS
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Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2111 WELCH STREET UNIT B312 HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 94/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BAYTOWN AREA DEMOCRATS
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$96.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 95/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name BAYTOWN AREA DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 96/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name BAYTOWN AREA DEMOCRATS
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6 Amount (\$) \$33.61	7 Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BAYTOWN AREA DEMOCRATS
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Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 2158 BAYTOWN, TX 77522
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 97/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name BELL COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$184.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name BELL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$59.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name BELL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 98/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name BELL COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name BELL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$64.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name BELL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$54.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 99/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BELL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BELL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$177.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BELL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 100/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name BELL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$73.94	7 Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name BELL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$1.92	Payee address; City; State; Zip Code P.O. BOX 3024 HARKER HEIGHTS, TX 76548
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BELL COUNTY TEXAS DEMOCRATIC WOMEN
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Amount (\$) \$19.20	Payee address; City; State; Zip Code P.O BOX 1426 BELTON, TX 76513
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 101/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name BELL COUNTY TEXAS DEMOCRATIC WOMEN	
6 Amount (\$) \$115.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O BOX 1426 BELTON, TX 76513	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name BELL COUNTY TEXAS DEMOCRATIC WOMEN	
Amount (\$) \$374.59 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O BOX 1426 BELTON, TX 76513	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name BELL COUNTY TEXAS DEMOCRATIC WOMEN		
Date 12/01/2024	Office held P.O BOX 1426 BELTON, TX 76513	
Amount (\$) \$259.32 <input type="checkbox"/> Expenditure from corporate funds	Office held P.O BOX 1426 BELTON, TX 76513	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name BELL COUNTY TEXAS DEMOCRATIC WOMEN		
Office sought P.O BOX 1426 BELTON, TX 76513		
Office held P.O BOX 1426 BELTON, TX 76513		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 102/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BELL COUNTY TEXAS DEMOCRATIC WOMEN
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6 Amount (\$) \$912.47 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O BOX 1426 BELTON, TX 76513
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BELL COUNTY TEXAS DEMOCRATIC WOMEN
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Amount (\$) \$153.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O BOX 1426 BELTON, TX 76513
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BELL COUNTY TEXAS DEMOCRATIC WOMEN
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Amount (\$) \$86.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O BOX 1426 BELTON, TX 76513
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 103/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name BELL COUNTY TEXAS DEMOCRATIC WOMEN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O BOX 1426 BELTON, TX 76513
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BELLAIRE BRAESWOOD DEMOCRATS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BELLAIRE BRAESWOOD DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 104/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name BELLAIRE BRAESWOOD DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BELLAIRE BRAESWOOD DEMOCRATS
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BELLAIRE BRAESWOOD DEMOCRATS
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Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 105/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BELLAIRE BRAESWOOD DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BELLAIRE BRAESWOOD DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 JAQUET DR BELLAIRE, TX 77401-2814
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY - COORDINATED CAMPAIGN
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Amount (\$) \$8,155.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 106/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BEXAR COUNTY DEMOCRATIC PARTY - COORDINATED CAMPAIGN
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6 Amount (\$) \$33.61	7 Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY - COORDINATED CAMPAIGN
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Amount (\$) \$24.01	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY - COORDINATED CAMPAIGN
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Amount (\$) \$9.60	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 107/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name BEXAR COUNTY DEMOCRATIC PARTY - COORDINATED CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY - COORDINATED CAMPAIGN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$1,201.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 108/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BEXAR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$1,001.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$222.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$225.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 109/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name BEXAR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$230.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$76.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$314.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 110/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name BEXAR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$220.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$187.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BEXAR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$110.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 111/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name BEXAR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 12534 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BEXAR COUNTY DEMOCRATIC WOMEN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 27025 DAFFODIL PLACE BOERNE, TX 78015
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BEXAR COUNTY DEMOCRATIC WOMEN
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 27025 DAFFODIL PLACE BOERNE, TX 78015
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 112/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name BEXAR COUNTY DEMOCRATIC WOMEN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 27025 DAFFODIL PLACE BOERNE, TX 78015
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BEXAR COUNTY DEMOCRATS PAC
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N LOOP 1604 W STE 108-230 SAN ANTONIO, TX 78248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BEXAR COUNTY TEJANO DEMOCRATS SD19
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Amount (\$) \$1,921.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 574 KENDALIA AVE. SAN ANTONIO, TX 78221
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 113/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name BEXAR COUNTY TEJANO DEMOCRATS SD19
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 574 KENDALIA AVE. SAN ANTONIO, TX 78221
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BEXAR COUNTY TEJANO DEMOCRATS SD19
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 574 KENDALIA AVE. SAN ANTONIO, TX 78221
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BEXAR COUNTY TEJANO DEMOCRATS SD19
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 574 KENDALIA AVE. SAN ANTONIO, TX 78221
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 114/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name BHOJANI FOR TEXAS
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6 Amount (\$) \$4,526.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BHOJANI FOR TEXAS
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Amount (\$) \$3,702.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name BHOJANI FOR TEXAS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 115/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name BHOJANI FOR TEXAS
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6 Amount (\$) \$504.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BHOJANI FOR TEXAS
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BHOJANI FOR TEXAS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 116/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BHOJANI FOR TEXAS
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6 Amount (\$) \$2,482.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BHOJANI FOR TEXAS
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Amount (\$) \$4,802.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6301 CAMPUS CIRCLE DR EAST SUITE 100 IRVING, TX 75063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BIG AND BRIGHT PAC
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 117/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BIG AND BRIGHT PAC
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6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BIG AND BRIGHT PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BIG AND BRIGHT PAC
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Amount (\$) \$414.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 118/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name BIG AND BRIGHT PAC
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6 Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BIG AND BRIGHT PAC
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BIG AND BRIGHT PAC
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Amount (\$) \$9.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 119/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name BIG AND BRIGHT PAC
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6 Amount (\$) \$357.26	7 Payee address; City; State; Zip Code PO BOX 16505 AUSTIN, TX 78761
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$2,854.12	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$1,229.96	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 120/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name BIRKHOLZ FOR TEXAS
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6 Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$68.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$83.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 121/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name BIRKHOLZ FOR TEXAS
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6 Amount (\$) \$183.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$93.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$36.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 122/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name BIRKHOLZ FOR TEXAS
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6 Amount (\$) \$66.42	7 Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BIRKHOLZ FOR TEXAS
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Amount (\$) \$19.58	Payee address; City; State; Zip Code 3441 ALEXANDRITE WAY ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BISHOP FOR DENTON
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 2720 CHEBI LANE DENTON, TX 76209
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 123/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BISHOP FOR DENTON
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6 Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2720 CHEBI LANE DENTON, TX 76209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BISHOP FOR DENTON
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2720 CHEBI LANE DENTON, TX 76209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BISHOP FOR DENTON
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Amount (\$) \$26.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2720 CHEBI LANE DENTON, TX 76209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 124/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name BISHOP FOR DENTON	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2720 CHEBI LANE DENTON, TX 76209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name BLACK AUSTIN DEMOCRATS	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name BLACK AUSTIN DEMOCRATS	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 125/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name BLACK AUSTIN DEMOCRATS	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name BLACK AUSTIN DEMOCRATS	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name BLACK AUSTIN DEMOCRATS	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 126/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name BLACK AUSTIN DEMOCRATS	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name BLACK AUSTIN DEMOCRATS	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 118 MILESTONE ROAD LIBERTY HILL, TX 78642	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2024	Payee name BLACK, MARY	
Amount (\$) \$2.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4302 SHOALWOOD AVENUE AUSTIN, TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 127/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Payee name BLACK, MARY	
6 Amount (\$) \$2.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4302 SHOALWOOD AVENUE AUSTIN, TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2024	Payee name BLACK, MARY	
Amount (\$) \$2.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4302 SHOALWOOD AVENUE AUSTIN, TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name BLANC, PHILIPPE	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6799 LEAF CREST DR APT 1C WHITSETT, NC 27377	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 128/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name BLANCO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$124.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$202.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$938.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 129/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name BLANCO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$230.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$240.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$236.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 130/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name BLANCO COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$92.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY	
Amount (\$) \$178.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY	
Amount (\$) \$345.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 131/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name BLANCO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$172.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name BLANCO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2223 JOHNSON CITY, TX 78636
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/20/2024	Payee name BLANKSTEIN, REBECCA
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Amount (\$) \$6.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 46DAVIDS CT DAYTON, NJ 08810
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 132/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name BLUE HORIZON TEXAS PAC
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6 Amount (\$) \$1,292.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BLUE HORIZON TEXAS PAC
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Amount (\$) \$441.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BLUE HORIZON TEXAS PAC
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Amount (\$) \$645.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 133/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name BLUE HORIZON TEXAS PAC
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6 Amount (\$) \$105.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BLUE HORIZON TEXAS PAC
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Amount (\$) \$576.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BLUE HORIZON TEXAS PAC
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Amount (\$) \$144.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 134/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BLUE HORIZON TEXAS PAC
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6 Amount (\$) \$15.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BLUE HORIZON TEXAS PAC
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Amount (\$) \$72.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BLUE HORIZON TEXAS PAC
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 135/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name BLUE HORIZON TEXAS PAC	
6 Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 780162 SAN ANTONIO, TX 78278	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name BOBBY GUERRA FOR STATE REPRESENTATIVE	
Amount (\$) \$313.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10213 N. 10TH STREET MCALLEN, TX 78504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name BOERNE AREA DEMOCRATS	
Amount (\$) \$96.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 136/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name BOERNE AREA DEMOCRATS
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6 Amount (\$) \$110.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BOERNE AREA DEMOCRATS
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Amount (\$) \$148.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BOERNE AREA DEMOCRATS
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Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 137/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name BOERNE AREA DEMOCRATS
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6 Amount (\$) \$28.81	7 Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name BOERNE AREA DEMOCRATS
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Amount (\$) \$91.23	Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BOERNE AREA DEMOCRATS
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Amount (\$) \$168.06	Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 138/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name BOERNE AREA DEMOCRATS	
6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name BOERNE AREA DEMOCRATS	
Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2132 BOERNE, TX 78006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name BOOTS ON THE GROUND	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 139/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name BOOTS ON THE GROUND	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name BOOTS ON THE GROUND	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name BORRIS MILES CAMPAIGN	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5302 ALMEDA RD HOUSTON, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 140/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BORRIS MILES CAMPAIGN
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6 Amount (\$) \$8,704.92 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5302 ALMEDA RD HOUSTON, TX 77004
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BORRIS MILES CAMPAIGN
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Amount (\$) \$1,921.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5302 ALMEDA RD HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BORRIS MILES CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5302 ALMEDA RD HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 141/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name BORRIS MILES CAMPAIGN	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5302 ALMEDA RD HOUSTON, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name BORRIS MILES CAMPAIGN	
Amount (\$) \$5,152.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5302 ALMEDA RD HOUSTON, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name BOWDEN, SALLY	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 41 E FIRST ST #3E NEW YORK, NY 10003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 142/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name BOWIE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 5132 TEXARKANA, TX 75505
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BOWIE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5132 TEXARKANA, TX 75505
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BRANDY L. L. BYRD TAX ASSESSOR-COLLECTOR, CANDIDATE
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3800 JOHN CHISHOLM LOOP APT B KILLEEN, TX 76542
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 143/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$596.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 144/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$76.82	7 Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$144.04	Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$106.59	Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 145/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$52.82	7 Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$81.62	Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$100.82	Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 146/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name BRAZORIA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$110.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3215 AMERSON DRIVE PEARLAND, TX 77584
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BRAZOS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$924.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name BRAZOS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$485.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 147/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name BRAZOS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name BRAZOS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$144.06	Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BRAZOS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$119.08	Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 148/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name BRAZOS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$128.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name BRAZOS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$177.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name BRAZOS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$124.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 149/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name BRAZOS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$99.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3232 BRYAN, TX 77805	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2024	Candidate/Officeholder name BRAZOS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$195.91 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 3232 BRYAN, TX 77805	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name BRETT4TEXAS CAMPAIGN	
Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 761 CYPRESS, TX 77410	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 150/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/17/2024	5 Payee name BREWER III, EARL
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6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 15819 LOCUST GROVE DR HOUSTON, TX 77095
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BRIAN M. MIDDLETON CAMPAIGN
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Amount (\$) \$9,148.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2574 SUGAR LAND, TX 77487
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name BRIAN M. MIDDLETON CAMPAIGN
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Amount (\$) \$4,802.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2574 SUGAR LAND, TX 77487
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 151/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name BRIDGETTE SMITH-LAWSON FOR FORT BEND COUNTY ATTORNEY
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6 Amount (\$) \$115.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5826 NEW TERRITORY BLVD. #813 SUGAR LAND, TX 77479
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name BROOKS, JAMES
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Amount (\$) \$33.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 106 TRASK LANE STILLWATER, NY 12170
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name BURLESON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 74 SNOOK, TX 77878
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 152/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name BURNET COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 171 MARBLE FALLS, TX 78654	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name BURNET COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 171 MARBLE FALLS, TX 78654	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2024	Candidate/Officeholder name BURNET COUNTY DEMOCRATIC PARTY	
Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 171 MARBLE FALLS, TX 78654	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 153/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name BURNET COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 171 MARBLE FALLS, TX 78654	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2024	Candidate/Officeholder name BURNET COUNTY DEMOCRATIC PARTY	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 171 MARBLE FALLS, TX 78654	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name Office sought Office held		
Date 10/27/2024	Candidate/Officeholder name BURNET COUNTY DEMOCRATS CLUB-BCDC	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 1541 BURNET, TX 78611	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 154/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name BURNET COUNTY DEMOCRATS CLUB-BCDC
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6 Amount (\$) \$96.05	7 Payee address; City; State; Zip Code P.O. BOX 1541 BURNET, TX 78611
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BURNET COUNTY DEMOCRATS CLUB-BCDC
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Amount (\$) \$24.01	Payee address; City; State; Zip Code P.O. BOX 1541 BURNET, TX 78611
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name BURNET COUNTY DEMOCRATS CLUB-BCDC
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Amount (\$) \$24.01	Payee address; City; State; Zip Code P.O. BOX 1541 BURNET, TX 78611
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 155/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name BURNET COUNTY DEMOCRATS CLUB-BCDC
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1541 BURNET, TX 78611
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name BUTTERWORTH, ALICE
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 907 W. MLBORN ST. MARION, IN 46952
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CALDWELL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 156/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name CALDWELL COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name CALDWELL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name CALDWELL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 157/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name CALDWELL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name CALDWELL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name CALDWELL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LOCKHART, TX 78644
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 158/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CALHOUN COUNTY DEMOCRATS PARTY
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1012 PORT LAVACA, TX 77979
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CALHOUN COUNTY DEMOCRATS PARTY
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1012 PORT LAVACA, TX 77979
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name CALHOUN COUNTY DEMOCRATS PARTY
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1012 PORT LAVACA, TX 77979
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 159/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CAMBIO TEXAS
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6 Amount (\$) \$347.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CAMBIO TEXAS
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Amount (\$) \$331.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name CAMBIO TEXAS
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Amount (\$) \$249.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 160/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name CAMBIO TEXAS
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6 Amount (\$) \$71.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CAMBIO TEXAS
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Amount (\$) \$68.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name CAMBIO TEXAS
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Amount (\$) \$221.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 161/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name CAMBIO TEXAS	
6 Amount (\$) \$86.92 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name CAMBIO TEXAS	
Amount (\$) \$98.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name CAMBIO TEXAS	
Amount (\$) \$79.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 162/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name CAMBIO TEXAS
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6 Amount (\$) \$129.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name CAMBIO TEXAS
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Amount (\$) \$57.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO STE 62 EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CAMERON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 STUART PLACE ROAD SUITE C HARLINGEN, TX 78552
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 163/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name CAMERON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1411 STUART PLACE ROAD SUITE C HARLINGEN, TX 78552
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CAMERON COUNTY DEMOCRATIC WOMEN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4906 CAMINO VERDE BROWNSVILLE, TX 78526
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name CAMERON COUNTY DEMOCRATIC WOMEN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4906 CAMINO VERDE BROWNSVILLE, TX 78526
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 164/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CAMPAIGN FOR DANNY NORRIS
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6 Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2111 HOUSTON, TX 77252
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CAMPAIGN FOR DANNY NORRIS
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2111 HOUSTON, TX 77252
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CAMPAIGN FUND OF DENISE WILKERSON
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Amount (\$) \$319.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 14332 ARLINGTON, TX 76094
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 165/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CAMPAIGN FUND OF DENISE WILKERSON
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6 Amount (\$) \$538.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 14332 ARLINGTON, TX 76094
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name CAMPAIGN FUND OF DENISE WILKERSON
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Amount (\$) \$38.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 14332 ARLINGTON, TX 76094
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name CAMPAIGN FUND OF DENISE WILKERSON
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Amount (\$) \$10.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 14332 ARLINGTON, TX 76094
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 166/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CAMPAIGN TO ELECT DEE HOWARD MULLINS
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6 Amount (\$) \$185.36	7 Payee address; City; State; Zip Code PO BOX 1169 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CAMPAIGN TO ELECT DEE HOWARD MULLINS
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Amount (\$) \$24.01	Payee address; City; State; Zip Code PO BOX 1169 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CAMPAIGN TO ELECT DEE HOWARD MULLINS
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Amount (\$) \$31.69	Payee address; City; State; Zip Code PO BOX 1169 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 167/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name CAMPAIGN TO ELECT DEE HOWARD MULLINS
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code PO BOX 1169 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name CARLA FOR TEXAS
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Amount (\$) \$9.60	Payee address; City; State; Zip Code P O BOX 8176 HOUSTON, TX 77288
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CARLOS WALKER CAMPAIGN
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Amount (\$) \$19.20	Payee address; City; State; Zip Code 4412 ARBORWOOD TRAIL FORT WORTH, TX 76123
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 168/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CARLOS WALKER CAMPAIGN
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6 Amount (\$) \$241.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4412 ARBORWOOD TRAIL FORT WORTH, TX 76123
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name CARLOS WALKER CAMPAIGN
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Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4412 ARBORWOOD TRAIL FORT WORTH, TX 76123
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CARMEN TURNER 4 TAX ASSESSOR - COLLECTOR
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Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2810 STOCK CREEK LANE RICHMOND, TX 77406
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 169/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CARMEN TURNER 4 TAX ASSESSOR - COLLECTOR
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6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2810 STOCK CREEK LANE RICHMOND, TX 77406
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name CARMICHAEL, PHILIP
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Amount (\$) \$125.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 301 RIVR RD NYACK, NY 10960
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CAROL ALVARADO CAMPAIGN
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Amount (\$) \$1,056.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 170/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CAROL ALVARADO CAMPAIGN
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6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name CAROL ALVARADO CAMPAIGN
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Amount (\$) \$192.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CAROL ALVARADO CAMPAIGN
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Amount (\$) \$336.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 171/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name CAROL ALVARADO CAMPAIGN
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name CAROL ALVARADO CAMPAIGN
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Amount (\$) \$6,003.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name CAROL ALVARADO CAMPAIGN
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Amount (\$) \$6,368.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 172/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CARSTENS FOR TEXAS
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6 Amount (\$) \$6.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2800 SHELTON WAY PLANO, TX 75093
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CASSANDRA HERNANDEZ FOR HD115
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Amount (\$) \$1,301.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CASSANDRA HERNANDEZ FOR HD115
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Amount (\$) \$2,281.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 173/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name CASSANDRA HERNANDEZ FOR HD115
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6 Amount (\$) \$72.03	7 Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name CASSANDRA HERNANDEZ FOR HD115
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Amount (\$) \$105.65	Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CASSANDRA HERNANDEZ FOR HD115
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Amount (\$) \$8,175.71	Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 174/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name CASSANDRA HERNANDEZ FOR HD115	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name CASSANDRA HERNANDEZ FOR HD115	
Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name CASSANDRA HERNANDEZ FOR HD115	
Amount (\$) \$3,241.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 16850 DALLAS PKWY DALLAS, TX 75248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 175/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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6 Amount (\$) \$3,987.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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Amount (\$) \$239.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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Amount (\$) \$3,649.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 176/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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6 Amount (\$) \$14.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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Amount (\$) \$0.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 177/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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6 Amount (\$) \$326.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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Amount (\$) \$0.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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Amount (\$) \$8.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 178/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name CECILIA CASTELLANO FOR TEXAS HOUSE DISTRICT 80
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6 Amount (\$) \$1.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 430 SAVANNAH HEIGHTS VON ORMY, TX 78073
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name CELIA ISRAEL CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8708 S. CONGRESS AVE STE 500 AUSTIN, TX 78745
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CENTRAL AUSTIN DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6112 HIGHLANDALE DR. AUSTIN, TX 78731
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 179/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CHARLES CHUCK CREWS FOR TEXAS HOUSE DISTRICT 128
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6 Amount (\$) \$168.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 7010 BAYTOWN, TX 77522
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CHARLES CHUCK CREWS FOR TEXAS HOUSE DISTRICT 128
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 7010 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name CHARLES CHUCK CREWS FOR TEXAS HOUSE DISTRICT 128
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 7010 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 180/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name CHARLES CHUCK CREWS FOR TEXAS HOUSE DISTRICT 128
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 7010 BAYTOWN, TX 77522
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name CHARLES CHUCK CREWS FOR TEXAS HOUSE DISTRICT 128
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 7010 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name CHARLES CHUCK CREWS FOR TEXAS HOUSE DISTRICT 128
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 7010 BAYTOWN, TX 77522
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 181/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CHASE WEST - CAMPAIGN FUND
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6 Amount (\$) \$19.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1506 GRAND JUNCTION DR. KATY, TX 77450
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name CHASE WEST - CAMPAIGN FUND
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1506 GRAND JUNCTION DR. KATY, TX 77450
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name CHASE WEST - CAMPAIGN FUND
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Amount (\$) \$19.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1506 GRAND JUNCTION DR. KATY, TX 77450
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 182/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name CHEROKEE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1888 JACKSONVILLE, TX 75766	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name CHEROKEE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1888 JACKSONVILLE, TX 75766	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name CHEROKEE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1888 JACKSONVILLE, TX 75766	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 183/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name CHEROKEE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1888 JACKSONVILLE, TX 75766	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name CHEROKEE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1888 JACKSONVILLE, TX 75766	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name CHISHOLM TRAIL STONEWALL DEMOCRATS OF JOHNSON COUNTY, TEXAS	
Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1881 CLEBURNE, TX 76033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 184/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name CHISHOLM TRAIL STONEWALL DEMOCRATS OF JOHNSON COUNTY, TEXAS	
6 Amount (\$) \$122.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1881 CLEBURNE, TX 76033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name CHISHOLM TRAIL STONEWALL DEMOCRATS OF JOHNSON COUNTY, TEXAS	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1881 CLEBURNE, TX 76033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name CHISHOLM TRAIL STONEWALL DEMOCRATS OF JOHNSON COUNTY, TEXAS	
Amount (\$) \$120.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1881 CLEBURNE, TX 76033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 185/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name CHISHOLM TRAIL STONEWALL DEMOCRATS OF JOHNSON COUNTY, TEXAS
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1881 CLEBURNE, TX 76033
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CHRIS TURNER CAMPAIGN
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Amount (\$) \$5,042.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 182093 ARLINGTON, TX 76096
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CHRIS TURNER CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 182093 ARLINGTON, TX 76096
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 186/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name CHRIS TURNER CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 182093 ARLINGTON, TX 76096
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CHRISTIAN MANUEL FOR 22
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Amount (\$) \$360.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3801 TURTLE CREEK DR PORT ARTHUR, TX 77642
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name CHRISTIAN MANUEL FOR 22
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Amount (\$) \$1,921.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3801 TURTLE CREEK DR PORT ARTHUR, TX 77642
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 187/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name CHRISTIAN MANUEL FOR 22
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6 Amount (\$) \$1,200.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3801 TURTLE CREEK DR PORT ARTHUR, TX 77642
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name CHRISTIAN MENEFEE FOR HARRIS COUNTY CAMPAIGN
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Amount (\$) \$18,097.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3129 OAKDALE ST. HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CHRISTIAN MENEFEE FOR HARRIS COUNTY CAMPAIGN
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Amount (\$) \$2,166.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3129 OAKDALE ST. HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 188/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name CHRISTIAN MENELEE FOR HARRIS COUNTY CAMPAIGN
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6 Amount (\$) \$408.20	7 Payee address; City; State; Zip Code 3129 OAKDALE ST. HOUSTON, TX 77004
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name CHRISTIAN MENELEE FOR HARRIS COUNTY CAMPAIGN
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Amount (\$) \$2,417.57	Payee address; City; State; Zip Code 3129 OAKDALE ST. HOUSTON, TX 77004
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name CHRISTIAN MENELEE FOR HARRIS COUNTY CAMPAIGN
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Amount (\$) \$6.72	Payee address; City; State; Zip Code 3129 OAKDALE ST. HOUSTON, TX 77004
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 189/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CHRISTINA MORALES CAMPAIGN
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6 Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name CHRISTINA MORALES CAMPAIGN
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name CHRISTINA MORALES CAMPAIGN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 190/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name CHRISTINA MORALES CAMPAIGN	
6 Amount (\$) \$864.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name CHRISTINA MORALES CAMPAIGN	
Amount (\$) \$1,296.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name CIRCLE C AREA DEMOCRATS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5701 W. SLAUGHTER LANE #A130-232 AUSTIN, TX 78749	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 191/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name CIRCLE C AREA DEMOCRATS	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5701 W. SLAUGHTER LANE #A130-232 AUSTIN, TX 78749	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name CIRCLE C AREA DEMOCRATS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5701 W. SLAUGHTER LANE #A130-232 AUSTIN, TX 78749	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name CLAUDIA ORDAZ PEREZ FOR TEXAS HOUSE 76	
Amount (\$) \$4,658.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 71738 EL PASO, TX 79917	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 192/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name CLAUDIA ORDAZ PEREZ FOR TEXAS HOUSE 76	
6 Amount (\$) \$3,842.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 71738 EL PASO, TX 79917	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name CLUBS IN ACTION PAC	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11910 CARILLON FOREST DR. ATASCOSITA, TX 77346	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name CLUBS IN ACTION PAC	
Amount (\$) \$24.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11910 CARILLON FOREST DR. ATASCOSITA, TX 77346	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 193/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name CLUBS IN ACTION PAC	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11910 CARILLON FOREST DR. ATASCOSITA, TX 77346	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name CLUBS IN ACTION PAC	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Office sought 11910 CARILLON FOREST DR. ATASCOSITA, TX 77346	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2024	Candidate/Officeholder name CLUBS IN ACTION PAC	
Amount (\$) \$34.57 <input type="checkbox"/> Expenditure from corporate funds	Office sought 11910 CARILLON FOREST DR. ATASCOSITA, TX 77346	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 194/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name CLUBS IN ACTION PAC
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6 Amount (\$) \$19.21	7 Payee address; City; State; Zip Code 11910 CARILLON FOREST DR. ATASCOSITA, TX 77346
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name COALITION OF DEMOCRATIC ALLIES
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Amount (\$) \$96.04	Payee address; City; State; Zip Code 100 WATERCOURSE WAY BASTROP, TX 78602
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name COALITION OF DEMOCRATIC ALLIES
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 100 WATERCOURSE WAY BASTROP, TX 78602
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 195/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name COALITION OF DEMOCRATIC ALLIES	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 100 WATERCOURSE WAY BASTROP, TX 78602	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name COALITION OF DEMOCRATIC ALLIES	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 WATERCOURSE WAY BASTROP, TX 78602	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name COALITION OF DEMOCRATIC ALLIES	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 WATERCOURSE WAY BASTROP, TX 78602	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 196/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name COALITION OF DEMOCRATIC ALLIES
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 100 WATERCOURSE WAY BASTROP, TX 78602
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name COLLIN COUNTY YOUNG DEMOCRATS
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Amount (\$) \$14.40	Payee address; City; State; Zip Code 1979 MERCER LANE PRINCETON, TX 75408
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name COLLIN COUNTY YOUNG DEMOCRATS
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Amount (\$) \$4.80	Payee address; City; State; Zip Code 1979 MERCER LANE PRINCETON, TX 75408
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 197/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name COLLIN COUNTY YOUNG DEMOCRATS
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1979 MERCER LANE PRINCETON, TX 75408
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name COLLIN COUNTY YOUNG DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1979 MERCER LANE PRINCETON, TX 75408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name COLLIN COUNTY YOUNG DEMOCRATS
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1979 MERCER LANE PRINCETON, TX 75408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 198/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name COLLIN FOR TEXAS	
6 Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 105 CHESTNUT LN HICKORY CREEK, TX 75065	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name COMAL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$134.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name COMAL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$316.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 199/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name COMAL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$240.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name COMAL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$196.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name COMAL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$140.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 200/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name COMAL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$288.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name COMAL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$196.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name COMAL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$235.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 201/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name COMAL COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$135.89 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 311226 NEW BRAUNFELS, TX 78131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2024	Candidate/Officeholder name COMAL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$283.31 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 311226 NEW BRAUNFELS, TX 78131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name COMAL COUNTY DEMOCRATIC PARTY		
Office sought P.O. BOX 311226 NEW BRAUNFELS, TX 78131		
Office held		
Date 12/31/2024	Candidate/Officeholder name COMAL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 311226 NEW BRAUNFELS, TX 78131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name COMAL COUNTY DEMOCRATIC PARTY		
Office sought P.O. BOX 311226 NEW BRAUNFELS, TX 78131		
Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 202/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name COMMITTEE TO ELECT DEBURR	
6 Amount (\$) \$254.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name COMMITTEE TO ELECT DEBURR	
Amount (\$) \$257.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name COMMITTEE TO ELECT DEBURR	
Amount (\$) \$38.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 203/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name COMMITTEE TO ELECT DEBURR	
6 Amount (\$) \$3.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name COMMITTEE TO ELECT DEBURR	
Amount (\$) \$54.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name COMMITTEE TO ELECT DEBURR	
Amount (\$) \$2.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 204/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name COMMITTEE TO ELECT DEBURR	
6 Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name COMMITTEE TO ELECT DEBURR	
Amount (\$) \$8.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name COMMITTEE TO ELECT DEBURR	
Amount (\$) \$3.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 205/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name COMMITTEE TO ELECT DEBURR
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6 Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2900 PAINTED LAKE CIRCLE 305 THE COLONY, TX 75056
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name COMMITTEE TO ELECT RAFAEL ANCHIA
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 4468 DALLAS, TX 75208
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name COMMITTEE TO ELECT RAFAEL ANCHIA
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Amount (\$) \$2,641.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 4468 DALLAS, TX 75208
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 206/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name COMMITTEE TO ELECT SENFRONIA THOMPSON
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 4828 LOOP CENTRAL DRIVE SUITE 600 HOUSTON, TX 77081
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name COMMITTEE TO ELECT SENFRONIA THOMPSON
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Amount (\$) \$4.80	Payee address; City; State; Zip Code 4828 LOOP CENTRAL DRIVE SUITE 600 HOUSTON, TX 77081
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name COMMITTEE TO ELECT SENFRONIA THOMPSON
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 4828 LOOP CENTRAL DRIVE SUITE 600 HOUSTON, TX 77081
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 207/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name CONSTABLE SILVIA TREVINO CAMPAIGN
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 1406 GODWIN STREET - HOUSTON TX 77023 HOUSTON, TX 77023
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name COPELAND, DENNIS
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 11400 BONHAM RANCH ROAD DRIPPING SPRINGS, TX 78620
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/05/2024	Payee name CORPORATION, PARSONS
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 1 RIVERWAY DR SUITE 1100 HOUSTON, TX 77056
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 208/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name CY-FAIR AREA DEMOCRATIC CLUB PAC
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 14119 HILLVALE DRIVE HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name CY-FAIR AREA DEMOCRATIC CLUB PAC
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14119 HILLVALE DRIVE HOUSTON, TX 77077
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name CY-FAIR AREA DEMOCRATIC CLUB PAC
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Amount (\$) \$35.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14119 HILLVALE DRIVE HOUSTON, TX 77077
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 209/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name CYPRESS-TOMBALL DEMOCRATS
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6 Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name CYPRESS-TOMBALL DEMOCRATS
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Amount (\$) \$139.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name CYPRESS-TOMBALL DEMOCRATS
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Amount (\$) \$364.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 210/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name CYPRESS-TOMBALL DEMOCRATS	
6 Amount (\$) \$172.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name CYPRESS-TOMBALL DEMOCRATS	
Amount (\$) \$1,061.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name CYPRESS-TOMBALL DEMOCRATS	
Amount (\$) \$188.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 211/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name CYPRESS-TOMBALL DEMOCRATS
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6 Amount (\$) \$342.32	7 Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name CYPRESS-TOMBALL DEMOCRATS
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Amount (\$) \$168.29	Payee address; City; State; Zip Code 12215 MOORCREEK DR HOUSTON, TX 77070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$774.80	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 212/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name DALLAS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$521.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$464.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$523.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 213/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name DALLAS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$323.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$360.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$263.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 214/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name DALLAS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$499.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$410.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DALLAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$278.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 215/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name DALLAS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$96.04	7 Payee address; City; State; Zip Code 1414 N WASHINGTON AVENUE DALLAS, TX 75204
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DANIEL LEE FOR TEXAS
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Amount (\$) \$1,678.95	Payee address; City; State; Zip Code 23430 FAIRBRANCH DR KATY, TX 77494
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DANIEL LEE FOR TEXAS
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Amount (\$) \$347.70	Payee address; City; State; Zip Code 23430 FAIRBRANCH DR KATY, TX 77494
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 216/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name DANIEL LEE FOR TEXAS
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6 Amount (\$) \$409.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 23430 FAIRBRANCH DR KATY, TX 77494
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2024	Payee name DANLEY, KATHLEEN AND MIKE
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2995 FALCONBERG DRIVE LA VERNE, CA 91750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DAVID MARTINEZ FOR POTTER COUNTY COMMISSIONER PRECINCT 1
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 4133 AMARILLO, TX 79116
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 217/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name DAVID MARTINEZ FOR POTTER COUNTY COMMISSIONER PRECINCT 1
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code PO BOX 4133 AMARILLO, TX 79116
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DAVID WILLIAMS FOR COMAL COUNTY SHERIFF
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Amount (\$) \$62.43	Payee address; City; State; Zip Code P.O BOX 133 BULVERDE, TX 78163
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DAVID WILLIAMS FOR COMAL COUNTY SHERIFF
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Amount (\$) \$24.01	Payee address; City; State; Zip Code P.O BOX 133 BULVERDE, TX 78163
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 218/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name DAWN RICHARDSON CAMPAIGN
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6 Amount (\$) \$34.38 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DAWN RICHARDSON CAMPAIGN
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Amount (\$) \$91.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name DAWN RICHARDSON CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 219/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name DAWN RICHARDSON CAMPAIGN	
6 Amount (\$) \$4.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2024	Candidate/Officeholder name DAWN RICHARDSON CAMPAIGN	
Amount (\$) \$126.85 <input type="checkbox"/> Expenditure from corporate funds	Office sought 296 MEADOW VIEW DRIVE KILLEEN, TX 76549	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name DAWN RICHARDSON CAMPAIGN	
Amount (\$) \$2.95 <input type="checkbox"/> Expenditure from corporate funds	Office sought 296 MEADOW VIEW DRIVE KILLEEN, TX 76549	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 220/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name DAWN RICHARDSON CAMPAIGN
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6 Amount (\$) \$15.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DAWN RICHARDSON CAMPAIGN
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Amount (\$) \$104.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name DAWN RICHARDSON CAMPAIGN
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Amount (\$) \$1.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 296 MEADOW VIEW DRIVE KILLEEN, TX 76549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 221/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name DEBBIE GONZALES INGALSBE CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4909 S. OLD BASTROP HWY SAN MARCOS, TX 78666
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DELIA PARKER MIMS DENTON COUNTY CHAIR
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Amount (\$) \$25.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2201 SPINKS 214 FLOWER MOUND, TX 75022
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DEMOCRATIC CLUB OF POLK COUNTY
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Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3626 HWY. 190 WEST LIVINGSTON, TX 77351
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 222/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name DEMOCRATIC CLUB OF POLK COUNTY
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6 Amount (\$) \$129.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3626 HWY. 190 WEST LIVINGSTON, TX 77351
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATIC CLUB OF POLK COUNTY
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Amount (\$) \$288.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3626 HWY. 190 WEST LIVINGSTON, TX 77351
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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Amount (\$) \$137.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 223/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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6 Amount (\$) \$89.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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Amount (\$) \$72.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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Amount (\$) \$44.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 224/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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6 Amount (\$) \$61.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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Amount (\$) \$179.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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Amount (\$) \$30.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 225/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name DEMOCRATIC CLUB OF SMITH COUNTY	
6 Amount (\$) \$81.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY	
Amount (\$) \$53.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name DEMOCRATIC CLUB OF SMITH COUNTY	
Amount (\$) \$140.19 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 226/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name DEMOCRATIC CLUB OF SMITH COUNTY
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6 Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 9854 TYLER, TX 75711
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name DEMOCRATIC CLUB OF THE WOODLANDS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7 E HONEY GROVE PLACE THE WOODLANDS, TX 77382
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DEMOCRATIC NON-URBAN CAUCUS
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Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 227/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name DEMOCRATIC NON-URBAN CAUCUS
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6 Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name DEMOCRATIC NON-URBAN CAUCUS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name DEMOCRATIC NON-URBAN CAUCUS
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Amount (\$) \$76.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 228/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name DEMOCRATIC NON-URBAN CAUCUS
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATIC NON-URBAN CAUCUS
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DEMOCRATIC NON-URBAN CAUCUS
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 229/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name DEMOCRATIC NON-URBAN CAUCUS
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6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DEMOCRATIC NON-URBAN CAUCUS
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 E MARSHALL AVE APT 30 LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$96.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 230/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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6 Amount (\$) \$72.01	7 Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 231/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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6 Amount (\$) \$96.03	7 Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$57.62	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$28.80	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 232/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$120.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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Amount (\$) \$76.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 233/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name DEMOCRATIC PARTY OF COLLIN COUNTY
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6 Amount (\$) \$19.21	7 Payee address; City; State; Zip Code 6829 K AVE STE #111 PLANO, TX 75093
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name DEMOCRATIC PARTY OF DAWSON COUNTY
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 509 N 14TH ST LAMESA, TX 79331
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name DEMOCRATIC PARTY OF DAWSON COUNTY
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 509 N 14TH ST LAMESA, TX 79331
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 234/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name DEMOCRATIC SMALL BUSINESS CAUCUS OF TEXAS
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6 Amount (\$) \$57.63	7 Payee address; City; State; Zip Code 2500 HAMMAN RD. BAY CITY, OK 77414
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DEMOCRATIC SMALL BUSINESS CAUCUS OF TEXAS
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 2500 HAMMAN RD. BAY CITY, OK 77414
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATIC SMALL BUSINESS CAUCUS OF TEXAS
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 2500 HAMMAN RD. BAY CITY, OK 77414
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 235/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name DEMOCRATIC SMALL BUSINESS CAUCUS OF TEXAS
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6 Amount (\$) \$38.42	7 Payee address; City; State; Zip Code 2500 HAMMAN RD. BAY CITY, OK 77414
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DEMOCRATIC SMALL BUSINESS CAUCUS OF TEXAS
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 2500 HAMMAN RD. BAY CITY, OK 77414
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DEMOCRATIC WOMEN OF COMAL COUNTY
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Amount (\$) \$821.20	Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 236/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name DEMOCRATIC WOMEN OF COMAL COUNTY	
6 Amount (\$) \$67.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name DEMOCRATIC WOMEN OF COMAL COUNTY	
Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name DEMOCRATIC WOMEN OF COMAL COUNTY	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 237/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name DEMOCRATIC WOMEN OF COMAL COUNTY
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6 Amount (\$) \$427.38	7 Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATIC WOMEN OF COMAL COUNTY
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Amount (\$) \$33.61	Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DEMOCRATIC WOMEN OF COMAL COUNTY
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Amount (\$) \$62.42	Payee address; City; State; Zip Code PO BOX 312332 NEW BRAUNFELS, TX 78131
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 238/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name DEMOCRATIC WOMEN OF DENTON COUNTY	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1413 CAMBRIDGE DENTON, TX 76209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name DEMOCRATS OF COMAL COUNTY	
Amount (\$) \$153.68 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name DEMOCRATS OF COMAL COUNTY		
Office sought P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767		
Office held		
Date 11/03/2024	Candidate/Officeholder name DEMOCRATS OF COMAL COUNTY	
Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name DEMOCRATS OF COMAL COUNTY		
Office sought P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767		
Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 239/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name DEMOCRATS OF COMAL COUNTY	
6 Amount (\$) \$153.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name DEMOCRATS OF COMAL COUNTY	
Amount (\$) \$259.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name DEMOCRATS OF COMAL COUNTY	
Amount (\$) \$609.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 240/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name DEMOCRATS OF COMAL COUNTY
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6 Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DEMOCRATS OF COMAL COUNTY
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Amount (\$) \$196.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DEMOCRATS OF COMAL COUNTY
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Amount (\$) \$437.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 241/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name DEMOCRATS OF COMAL COUNTY
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6 Amount (\$) \$537.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DEMOCRATS OF COMAL COUNTY
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Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 310767 NEW BRAUNFELS, TX 78131-0767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DEMOCRATS OF LA PORTE
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Amount (\$) \$34.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 902 SHADOW CREEK DR LA PORTE, TX 77571
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 242/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name DEMOCRATS OF LA PORTE	
6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 902 SHADOW CREEK DR LA PORTE, TX 77571	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name DEMOCRATS OF LA PORTE	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 902 SHADOW CREEK DR LA PORTE, TX 77571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name DEMOCRATS OF LA PORTE	
Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 902 SHADOW CREEK DR LA PORTE, TX 77571	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 243/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name DEMOCRATS OF LA PORTE
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 902 SHADOW CREEK DR LA PORTE, TX 77571
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DEMOCRATS OF LA PORTE
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Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 902 SHADOW CREEK DR LA PORTE, TX 77571
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name DEMOCRATS WITH DISABILITIES
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1200 WARBLER DR KERRVILLE, TX 78028
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 244/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name DEMOCRATS WITH DISABILITIES
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1200 WARBLER DR KERRVILLE, TX 78028
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DENTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4,271.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DENTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$1,144.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 245/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name DENTON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$618.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2024	Candidate/Officeholder name DENTON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$567.11 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 2144 ROANOKE, TX 76262	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name DENTON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$323.65 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 2144 ROANOKE, TX 76262	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 246/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name DENTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$174.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name DENTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$657.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DENTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$518.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 247/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name DENTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$132.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name DENTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$302.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name DENTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$11.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2144 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 248/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name DEV MERUGUMALA FOR STATE REPRESENTATIVE OF TEXAS DISTRICT 23
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 2001 SCOTT ST APT 13 LA MARQUE, TX 77568
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DEV MERUGUMALA FOR STATE REPRESENTATIVE OF TEXAS DISTRICT 23
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Amount (\$) \$288.15	Payee address; City; State; Zip Code 2001 SCOTT ST APT 13 LA MARQUE, TX 77568
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name DEV MERUGUMALA FOR STATE REPRESENTATIVE OF TEXAS DISTRICT 23
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 2001 SCOTT ST APT 13 LA MARQUE, TX 77568
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 249/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name DEV MERUGUMALA FOR STATE REPRESENTATIVE OF TEXAS DISTRICT 23
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6 Amount (\$) \$96.05	7 Payee address; City; State; Zip Code 2001 SCOTT ST APT 13 LA MARQUE, TX 77568
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DEXTER MCCOY CAMPAIGN
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Amount (\$) \$480.25	Payee address; City; State; Zip Code 23534 MCNABB SPUR LANE RICHMOND, TX 77469
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DEXTER MCCOY CAMPAIGN
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Amount (\$) \$13,302.91	Payee address; City; State; Zip Code 23534 MCNABB SPUR LANE RICHMOND, TX 77469
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 250/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name DEXTER MCCOY CAMPAIGN
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6 Amount (\$) \$18,537.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 23534 MCNABB SPUR LANE RICHMOND, TX 77469
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name DEXTER MCCOY CAMPAIGN
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Amount (\$) \$95.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23534 MCNABB SPUR LANE RICHMOND, TX 77469
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DEXTER MCCOY CAMPAIGN
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Amount (\$) \$4,802.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 23534 MCNABB SPUR LANE RICHMOND, TX 77469
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 251/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/26/2024	5 Payee name DIFIORE, ROBERT
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 729 BENNINGTON DR RALEIGH, NC 27615-1202
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DONNA HOWARD CAMPAIGN
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Amount (\$) \$792.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5375 AUSTIN, TX 78763-5357
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DONNA HOWARD CAMPAIGN
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Amount (\$) \$792.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5375 AUSTIN, TX 78763-5357
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 252/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name DONNA HOWARD CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 5375 AUSTIN, TX 78763-5357
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DONNA HOWARD CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5375 AUSTIN, TX 78763-5357
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DONNA HOWARD CAMPAIGN
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Amount (\$) \$768.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5375 AUSTIN, TX 78763-5357
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 253/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name DOUGLAS FOR DISTRICT ATTORNEY
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6 Amount (\$) \$100.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2617 W MORTON ST STE 101 DENISON, TX 75020
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DOUGLAS FOR DISTRICT ATTORNEY
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Amount (\$) \$725.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2617 W MORTON ST STE 101 DENISON, TX 75020
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DOUGLAS FOR DISTRICT ATTORNEY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2617 W MORTON ST STE 101 DENISON, TX 75020
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 254/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name DOUGPETERSONFORTXHOUSE129
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 14917 EL CAMINO REAL P.O. BOX 891193 HOUSTON, TX 77289
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DOUGPETERSONFORTXHOUSE129
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 14917 EL CAMINO REAL P.O. BOX 891193 HOUSTON, TX 77289
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name DOUGPETERSONFORTXHOUSE129
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Amount (\$) \$216.11	Payee address; City; State; Zip Code 14917 EL CAMINO REAL P.O. BOX 891193 HOUSTON, TX 77289
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 255/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name DR. CARLA WYATT FOR HARRIS COUNTY TREASURER	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4814 MARIETTA HOUSTON, TX 77021	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name DR. CARLA WYATT FOR HARRIS COUNTY TREASURER	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4814 MARIETTA HOUSTON, TX 77021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name DR. CARLA WYATT FOR HARRIS COUNTY TREASURER	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4814 MARIETTA HOUSTON, TX 77021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 256/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name DR. CARLA WYATT FOR HARRIS COUNTY TREASURER
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 4814 MARIETTA HOUSTON, TX 77021
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DR. CARLA WYATT FOR HARRIS COUNTY TREASURER
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 4814 MARIETTA HOUSTON, TX 77021
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DR. LALANI FOR TEXAS
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Amount (\$) \$2,689.40	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 257/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name DR. LALANI FOR TEXAS
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6 Amount (\$) \$2,641.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name DR. LALANI FOR TEXAS
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Amount (\$) \$2,713.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name DR. LALANI FOR TEXAS
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Amount (\$) \$5,282.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 258/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name DR. LALANI FOR TEXAS
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6 Amount (\$) \$1,536.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name DR. LALANI FOR TEXAS
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Amount (\$) \$7,635.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6514 HOUSTON, TX 77265
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name DR. MCAULIFFE CAMPAIGN
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 202 HEWETT DRIVE ROCKPORT, TX 78382
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 259/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name DRAKE FOR TEXAS HOUSE
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6 Amount (\$) \$288.14 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 3508 SHERMAN, TX 75091
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name DRAKE FOR TEXAS HOUSE
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Amount (\$) \$629.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 3508 SHERMAN, TX 75091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2024	Payee name DRESKIN, HELENE
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 34 HERON ROAD LIVINGSTON, NJ 07039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 260/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Payee name DRESKIN, HELENE	
6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 34 HERON ROAD LIVINGSTON, NJ 07039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name DWAIN HANDLEY 4 TEXAS	
Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1181 BURNET, TX 78611	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name DWAIN HANDLEY 4 TEXAS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1181 BURNET, TX 78611	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 261/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name DWAIN HANDLEY 4 TEXAS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 1181 BURNET, TX 78611
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name DWAIN HANDLEY 4 TEXAS
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Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1181 BURNET, TX 78611
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name DWAIN HANDLEY 4 TEXAS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1181 BURNET, TX 78611
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 262/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name EAST WILCO DEMOCRATS
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 109 W 4TH ST TAYLOR, TX 76574
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name EAST WILCO DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 109 W 4TH ST TAYLOR, TX 76574
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name EAST WILCO DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 109 W 4TH ST TAYLOR, TX 76574
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 263/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name EASTSIDE DEMOCRATS OF EL PASO
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6 Amount (\$) \$21.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name EASTSIDE DEMOCRATS OF EL PASO
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Amount (\$) \$21.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name EASTSIDE DEMOCRATS OF EL PASO
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 264/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name EASTSIDE DEMOCRATS OF EL PASO	
6 Amount (\$) \$191.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name EASTSIDE DEMOCRATS OF EL PASO	
Amount (\$) \$134.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name EASTSIDE DEMOCRATS OF EL PASO	
Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 265/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name EASTSIDE DEMOCRATS OF EL PASO	
6 Amount (\$) \$42.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name EASTSIDE DEMOCRATS OF EL PASO	
Amount (\$) \$21.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8904 WH BURGES EL PASO, TX 79925	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name EBONY TURNER FOR HOUSE DISTRICT 96	
Amount (\$) \$720.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 923 MANSFIELD, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 266/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name EBONY TURNER FOR HOUSE DISTRICT 96
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6 Amount (\$) \$80.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 923 MANSFIELD, TX 76063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name EBONY TURNER FOR HOUSE DISTRICT 96
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 923 MANSFIELD, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name EBONY TURNER FOR HOUSE DISTRICT 96
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 923 MANSFIELD, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 267/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ECTOR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 514 N LEE AVE. ODESSA, TX 79761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name EDDIE MORALES CAMPAIGN
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Amount (\$) \$2,522.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name EDDIE MORALES CAMPAIGN
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Amount (\$) \$273.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 268/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name EDDIE MORALES CAMPAIGN	
6 Amount (\$) \$1.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name EDDIE MORALES CAMPAIGN	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name EDDIE MORALES CAMPAIGN	
Amount (\$) \$129.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 269/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name EDDIE MORALES CAMPAIGN
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6 Amount (\$) \$1.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name EDDIE MORALES CAMPAIGN
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Amount (\$) \$2,401.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 352 HILLCREST BLVD EAGLE PASS, TX 78852
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$225.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 270/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name EL PASO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$1,532.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$288.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$244.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 271/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name EL PASO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$350.73 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$86.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$446.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 272/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name EL PASO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$302.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$518.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name EL PASO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$163.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 273/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name EL PASO COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1401 MONTANA SUITE E EL PASO, TX 79902	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name ELECT DARREL EVANS	
Amount (\$) \$672.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 TRAILDUST DR MCKINNEY, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name ELECT DARREL EVANS	
Amount (\$) \$366.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 TRAILDUST DR MCKINNEY, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 274/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name ELECT DARREL EVANS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1400 TRAILDUST DR MCKINNEY, TX 75069
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ELECT DARREL EVANS
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 TRAILDUST DR MCKINNEY, TX 75069
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ELECT DARREL EVANS
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Amount (\$) \$3.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 TRAILDUST DR MCKINNEY, TX 75069
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 275/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ELLIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$134.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ELLIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$217.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ELLIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$144.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 276/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name ELLIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ELLIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ELLIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$170.00	Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 277/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name ELLIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ELLIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ELLIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 278/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name ELLIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$49.94 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4031 WISTERIA TRAIL MIDLOTHIAN, TX 76065
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/30/2024	Payee name ENGELS, JAN
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Amount (\$) \$20.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2219 KING JAMES PLACE EL PASO, TX 79903
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name EPYD
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 279/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name EPYD
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6 Amount (\$) \$9.60	7 Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name EPYD
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name EPYD
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Amount (\$) \$24.00	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 280/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name EPYD
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6 Amount (\$) \$14.40	7 Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name EPYD
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Amount (\$) \$624.29	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name EPYD
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Amount (\$) \$182.47	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 281/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name EPYD
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6 Amount (\$) \$336.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name EPYD
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Amount (\$) \$57.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name EPYD
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6505 KENMORE EL PASO, TX 79932
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 282/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ERATH COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ERATH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ERATH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 283/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name ERATH COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ERATH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ERATH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 284/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name ERATH COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 271 STEPHENVILLE, TX 76401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ERIC FOR TEXAS 44
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Amount (\$) \$360.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POST OFFICE BOX 141 SEGUIN, TX 78156
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ERIC FOR TEXAS 44
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Amount (\$) \$547.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POST OFFICE BOX 141 SEGUIN, TX 78156
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 285/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name ERIC FOR TEXAS 44
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code POST OFFICE BOX 141 SEGUIN, TX 78156
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ERIC FOR TEXAS 44
--------------------	---------------------------------

Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POST OFFICE BOX 141 SEGUIN, TX 78156
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ERIN GAMEZ CAMPAIGN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 777 E. HARRISON ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 286/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ERIN GAMEZ CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 777 E. HARRISON ST BROWNSVILLE, TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ERIN GAMEZ CAMPAIGN
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Amount (\$) \$1,921.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 777 E. HARRISON ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ERIN GAMEZ CAMPAIGN
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Amount (\$) \$2,410.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 777 E. HARRISON ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 287/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ERIN GAMEZ CAMPAIGN
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6 Amount (\$) \$12,726.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 777 E. HARRISON ST BROWNSVILLE, TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ERIN GAMEZ CAMPAIGN
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Amount (\$) \$9,283.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 777 E. HARRISON ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ERIN SHANK FOR TEXAS HOUSE
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Amount (\$) \$1,646.74 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 288/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ERIN SHANK FOR TEXAS HOUSE
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6 Amount (\$) \$935.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name ERIN SHANK FOR TEXAS HOUSE
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Amount (\$) \$370.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ERIN SHANK FOR TEXAS HOUSE
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Amount (\$) \$135.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 289/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name ERIN SHANK FOR TEXAS HOUSE	
6 Amount (\$) \$72.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name ERIN SHANK FOR TEXAS HOUSE	
Amount (\$) \$91.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name ERIN SHANK FOR TEXAS HOUSE	
Amount (\$) \$140.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 290/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ERIN SHANK FOR TEXAS HOUSE
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6 Amount (\$) \$68.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ERIN SHANK FOR TEXAS HOUSE
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Amount (\$) \$48.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 32672 WACO, TX 76703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ERIN ZWIENER FOR TEXAS HOUSE
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Amount (\$) \$1,342.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 291/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ERIN ZWIENER FOR TEXAS HOUSE
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6 Amount (\$) \$903.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name ERIN ZWIENER FOR TEXAS HOUSE
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ERIN ZWIENER FOR TEXAS HOUSE
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Amount (\$) \$221.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 292/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name ERIN ZWIENER FOR TEXAS HOUSE
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6 Amount (\$) \$273.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ERIN ZWIENER FOR TEXAS HOUSE
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Amount (\$) \$1,099.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ERIN ZWIENER FOR TEXAS HOUSE
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Amount (\$) \$331.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 293/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ERIN ZWIENER FOR TEXAS HOUSE
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6 Amount (\$) \$192.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ERIN ZWIENER FOR TEXAS HOUSE
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Amount (\$) \$12,045.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 184 DRIFTWOOD, TX 78619
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FAR NORTHWEST PROGRESSIVES OF TRAVIS COUNTY, TEXAS
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Amount (\$) \$211.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 294/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name FAR NORTHWEST PROGRESSIVES OF TRAVIS COUNTY, TEXAS
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6 Amount (\$) \$158.47	7 Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name FAR NORTHWEST PROGRESSIVES OF TRAVIS COUNTY, TEXAS
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Amount (\$) \$52.82	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name FAR NORTHWEST PROGRESSIVES OF TRAVIS COUNTY, TEXAS
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 295/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name FAR NORTHWEST PROGRESSIVES OF TRAVIS COUNTY, TEXAS
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6 Amount (\$) \$19.21	7 Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FARM AND FOOD ACTION PAC
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Amount (\$) \$24.01	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name FARM AND FOOD ACTION PAC
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Amount (\$) \$96.05	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 296/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name FARM AND FOOD ACTION PAC
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6 Amount (\$) \$1,104.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name FARM AND FOOD ACTION PAC
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name FARM AND FOOD ACTION PAC
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 297/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$120.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$150.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 298/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$72.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 299/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 300/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name FAYETTE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name FAYETTE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 131 LA GRANGE, TX 78945	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name FERGUS, JIM	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 8099 TUMACACORI, AZ 85640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 301/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/11/2024	5 Payee name FINE, MARY ELLEN
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6 Amount (\$) \$4.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2025 AMUR DR AUSTIN, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name FIRESTONE, RAYMOND
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name FIRESTONE, RAYMOND
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Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 302/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Payee name FIRESTONE, RAYMOND	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2024	Payee name FIRESTONE, RAYMOND	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2024	Payee name FIRESTONE, RAYMOND	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 303/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Payee name FIRESTONE, RAYMOND	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/06/2024	Candidate/Officeholder name Office sought Office held	
Payee name FIRESTONE, RAYMOND		
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 NEEW YORK, NY 10023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/06/2024	Candidate/Officeholder name Office sought Office held	
Payee name FIRESTONE, RAYMOND		
Amount (\$) \$20.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 10A MANHATTAN, NY 10023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 304/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/06/2024	5 Payee name FIRESTONE, RAYMOND
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6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 330 W 72 10A MANHATTAN, NY 10023
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name FIRESTONE, RAYMOND
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 APT. 10A MANHATTAN, NY 10023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2024	Payee name FIRESTONE, RAYMOND
--------------------	----------------------------------

Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 330 W 72 APT. 10A MANHATTAN, NY 10023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 305/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/06/2024	5 Payee name FIRESTONE, RAYMOND	
6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 330 W 72 APT. 10A NEW YORK, NY 10023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2024	Candidate/Officeholder name FIRSCHING, RUTH	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 10/30/2024	Candidate/Officeholder name FIRSCHING, RUTH	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2024	Candidate/Officeholder name FIRSCHING, RUTH	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2024	Candidate/Officeholder name FIRSCHING, RUTH	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 306/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/30/2024	5 Payee name FIRSCHING, RUTH	
6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11001 AUSTIN AVE AUSTIN, TX 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name FIRSCHING, RUTH	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11001 AUSTIN LN APT 10207 AUSTIN, TX 78758-1102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name FIRSCHING, RUTH	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11001 AUSTIN LN APT 10207 AUSTIN, TX 78758-1102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 307/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FLIP TEXAS BLUE FUND
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6 Amount (\$) \$60,111.14 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FLIP TEXAS BLUE FUND
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Amount (\$) \$65,794.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FLIP TEXAS BLUE FUND
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Amount (\$) \$20,243.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 308/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name FLIP TEXAS BLUE FUND
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6 Amount (\$) \$215.14 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name FLIP TEXAS BLUE FUND
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Amount (\$) \$2,267.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name FLIP TEXAS BLUE FUND
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Amount (\$) \$960.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 309/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name FLIP TEXAS BLUE FUND
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6 Amount (\$) \$482.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name FLIP TEXAS BLUE FUND
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Amount (\$) \$417.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300624 AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name FOR ALL TEXANS
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Amount (\$) \$4,802.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 33079 WASHINGTON, DC 20033
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 310/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$273.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$115.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$211.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 311/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$116.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$249.71 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 312/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$105.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$106.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$201.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 313/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$153.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name FORT BEND COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13515 SW FRWY SUITE #204 SUGAR LAND, TX 77478
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FORT BEND FIRST PAC
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Amount (\$) \$3,361.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1398 RICHMOND, TX 77406
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 314/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name FORT BEND UNITED	
6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 420811 HOUSTON, TX 77242	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name FORT BEND YOUNG DEMOCRATS	
Amount (\$) \$1,575.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3536 HWY 6 S STE 256 SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name FORT BEND YOUNG DEMOCRATS	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3536 HWY 6 S STE 256 SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 315/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FOX FOR SD25
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6 Amount (\$) \$135.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FOX FOR SD25
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Amount (\$) \$322.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FOX FOR SD25
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Amount (\$) \$29.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 316/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name FOX FOR SD25
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name FOX FOR SD25
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Amount (\$) \$120.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name FOX FOR SD25
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Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 317/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name FOX FOR SD25
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6 Amount (\$) \$15.36	7 Payee address; City; State; Zip Code 2224 SUR AVE NEW BRAUNFELS, TX 78132
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name FRED MEDINA FOR TEXAS HOUSE 14
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 216 N BRYAN AVE SUITE 110 BRYAN, TX 77803
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name FRED MEDINA FOR TEXAS HOUSE 14
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Amount (\$) \$5.76	Payee address; City; State; Zip Code 216 N BRYAN AVE SUITE 110 BRYAN, TX 77803
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 318/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name FRED MEDINA FOR TEXAS HOUSE 14	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 216 N BRYAN AVE SUITE 110 BRYAN, TX 77803	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2024	Candidate/Officeholder name FRED MEDINA FOR TEXAS HOUSE 14	
Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Office sought 216 N BRYAN AVE SUITE 110 BRYAN, TX 77803	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/05/2024	Candidate/Officeholder name FREEMAN, JESSE	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5642 SAN JOSE AVE RICHMOND, CA 94804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 319/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FREY FOR TEXAS
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6 Amount (\$) \$172.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6017 CYPRESS COVE DR THE COLONY, TX 75056
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FREY FOR TEXAS
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Amount (\$) \$6.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6017 CYPRESS COVE DR THE COLONY, TX 75056
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name FRIENDS OF ANA-MARIA RAMOS
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Amount (\$) \$1,423.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 320/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name FRIENDS OF ANA-MARIA RAMOS
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6 Amount (\$) \$76.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FRIENDS OF ANA-MARIA RAMOS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name FRIENDS OF ANA-MARIA RAMOS
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Amount (\$) \$460.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 321/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name FRIENDS OF ANA-MARIA RAMOS	
6 Amount (\$) \$328.41 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name FRIENDS OF ANA-MARIA RAMOS	
Amount (\$) \$2,590.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name FRIENDS OF ANA-MARIA RAMOS	
Amount (\$) \$688.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 322/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name FRIENDS OF ANA-MARIA RAMOS	
6 Amount (\$) \$3,444.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 852227 RICHARDSON, TX 75085	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name FRIENDS OF CLAY JENKINS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 600757 DALLAS, TX 75360	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name FRIENDS OF CLAY JENKINS	
Amount (\$) \$31,024.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 600757 DALLAS, TX 75360	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 323/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name FRIENDS OF CLAY JENKINS
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6 Amount (\$) \$1,296.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 600757 DALLAS, TX 75360
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name FRIENDS OF CLAY JENKINS
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Amount (\$) \$8,404.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 600757 DALLAS, TX 75360
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name FRIENDS OF CLAY JENKINS
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Amount (\$) \$7,453.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 600757 DALLAS, TX 75360
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 324/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name FRIENDS OF CLAY JENKINS
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6 Amount (\$) \$9,605.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 600757 DALLAS, TX 75360
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name FRIENDS OF RAQUEL SAENZ
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2000 FM 1460 APT 5303 GEORGETOWN, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name FRIENDS OF RAQUEL SAENZ
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Amount (\$) \$242.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2000 FM 1460 APT 5303 GEORGETOWN, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 325/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FRIENDS OF STACI CHILDS
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6 Amount (\$) \$1,248.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2709 ROSALIE STREET HOUSTON, TX 77004
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name FRIENDS OF STACI CHILDS
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Amount (\$) \$192.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2709 ROSALIE STREET HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name FRIENDS OF STACI CHILDS
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Amount (\$) \$1.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2709 ROSALIE STREET HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 326/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name FRIENDS TO ELECT LASHELLE SCOTT FOR PRECINCT CHAIR 559
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6 Amount (\$) \$432.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2277 WINROCK BOULEVARD APT 322 HOUSTON, TX 77057
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 327/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE	
Amount (\$) \$158.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 328/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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Amount (\$) \$120.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 329/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name FRISCO DEMOCRATS POLITICAL ACTION COMMITTEE
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5250 TOWN AND COUNTRY BLVD. APT 10204 FRISCO, TX 75034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name FUNKY EAST DALLAS DEMOCRATS
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 330/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name FUNKY EAST DALLAS DEMOCRATS	
6 Amount (\$) \$44.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name FUNKY EAST DALLAS DEMOCRATS	
Amount (\$) \$480.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name FUNKY EAST DALLAS DEMOCRATS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 331/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name FUNKY EAST DALLAS DEMOCRATS
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6 Amount (\$) \$485.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name FUNKY EAST DALLAS DEMOCRATS
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Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name FUNKY EAST DALLAS DEMOCRATS
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Amount (\$) \$825.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 332/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name FUNKY EAST DALLAS DEMOCRATS
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6 Amount (\$) \$81.63	7 Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name FUNKY EAST DALLAS DEMOCRATS
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Amount (\$) \$4.80	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name FUNKY EAST DALLAS DEMOCRATS
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Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 181734 DALLAS, TX 75218
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 333/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$1,522.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$85.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$176.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 334/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 335/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$115.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$27.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 336/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name GALVESTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1071 LA MARQUE, TX 77568-1071
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$116.19 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$124.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 337/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name GALVESTON COUNTY DEMOCRATS CLUB
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6 Amount (\$) \$91.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$307.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$447.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 338/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name GALVESTON COUNTY DEMOCRATS CLUB
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6 Amount (\$) \$235.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$124.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 339/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name GALVESTON COUNTY DEMOCRATS CLUB
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6 Amount (\$) \$150.77	7 Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$56.65	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name GALVESTON COUNTY DEMOCRATS CLUB
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Amount (\$) \$105.63	Payee address; City; State; Zip Code P.O.BOX 614 GALVESTON, TX 77553
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 340/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/14/2024	5 Payee name GANT, ALAN	
6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3404 ROBIN ROAD PLANO, TX 75075	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name GARLAND AREA DEMOCRATIC CLUB	
Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name GARLAND AREA DEMOCRATIC CLUB	
Amount (\$) \$67.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 341/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name GARLAND AREA DEMOCRATIC CLUB	
6 Amount (\$) \$91.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name GARLAND AREA DEMOCRATIC CLUB	
Amount (\$) \$43.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name GARLAND AREA DEMOCRATIC CLUB	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 342/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name GARLAND AREA DEMOCRATIC CLUB
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6 Amount (\$) \$52.81	7 Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GARLAND AREA DEMOCRATIC CLUB
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Amount (\$) \$100.82	Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name GARLAND AREA DEMOCRATIC CLUB
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Amount (\$) \$72.00	Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 343/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name GARLAND AREA DEMOCRATIC CLUB	
6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 462444 GARLAND, TX 75046-2444	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name GASSAWAY4DISTRICT87	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3484 AMARILLO, TX 79116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name GASSAWAY4DISTRICT87	
Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3484 AMARILLO, TX 79116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 344/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name GASSAWAY4DISTRICT87
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3484 AMARILLO, TX 79116
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GENE WU CAMPAIGN
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name GENE WU CAMPAIGN
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Amount (\$) \$1,776.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 345/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name GENE WU CAMPAIGN
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6 Amount (\$) \$2,641.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name GENE WU CAMPAIGN
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name GENE WU CAMPAIGN
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Amount (\$) \$600.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 346/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name GENE WU CAMPAIGN
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6 Amount (\$) \$13,829.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GENE WU CAMPAIGN
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Amount (\$) \$53,253.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 742442 HOUSTON, TX 77274
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GEORGE KING CAMPAIGN
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Amount (\$) \$663.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 411 ADDISON, TX 75001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 347/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name GEORGE KING CAMPAIGN
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6 Amount (\$) \$259.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 411 ADDISON, TX 75001
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$648.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 348/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name GILLESPIE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$369.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$259.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 349/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name GILLESPIE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$552.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$336.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$427.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 350/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name GILLESPIE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name GILLESPIE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$120.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 408 CORA STREET FREDERICKSBURG, TX 78624
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GINSBERG FOR TEXAS
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Amount (\$) \$11,290.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 351/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name GINSBERG FOR TEXAS
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6 Amount (\$) \$9,221.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name GINSBERG FOR TEXAS
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Amount (\$) \$753.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name GINSBERG FOR TEXAS
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Amount (\$) \$13.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 352/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name GINSBERG FOR TEXAS	
6 Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name GINSBERG FOR TEXAS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name GINSBERG FOR TEXAS	
Amount (\$) \$24.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 353/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name GINSBERG FOR TEXAS	
6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4502 W LOVERS LANE DALLAS, TX 75209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name GLEN MAXEY MAKING GOVERNMENT WORK	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5200 GUADALUPE ST AUSTIN, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name GOTV TEXAS PAC	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 354/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name GOTV TEXAS PAC
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name GOTV TEXAS PAC
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GOTV TEXAS PAC
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 355/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name GOTV TEXAS PAC
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name GOTV TEXAS PAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name GOTV TEXAS PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6333 E. MOCKINGBIRD LN. SUITE 147-686 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 356/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/27/2024	5 Payee name GOULD, WARREN	
6 Amount (\$) \$12.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3704 CRESTLINE ROAD FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name GRACE FOR TEXAS	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 9492 TYLER, TX 75711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name GRACE FOR TEXAS	
Amount (\$) \$2.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 9492 TYLER, TX 75711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 357/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name GRACE FOR TEXAS
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 9492 TYLER, TX 75711
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GRACE FOR TEXAS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 9492 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GRACE FOR TEXAS
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 9492 TYLER, TX 75711
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 358/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name GRADY PRESTAGE CAMPAIGN
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6 Amount (\$) \$720.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name GRADY PRESTAGE CAMPAIGN
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Amount (\$) \$1,680.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name GRADY PRESTAGE CAMPAIGN
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Amount (\$) \$5,378.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 359/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name GRADY PRESTAGE CAMPAIGN
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6 Amount (\$) \$5,282.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GRADY PRESTAGE CAMPAIGN
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Amount (\$) \$8,164.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name GRADY PRESTAGE CAMPAIGN
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Amount (\$) \$11,045.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 360/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name GRADY PRESTAGE CAMPAIGN
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6 Amount (\$) \$11,526.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name GRADY PRESTAGE CAMPAIGN
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Amount (\$) \$18,345.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 835 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GRAYSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 361/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name GRAYSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name GRAYSON COUNTY DEMOCRATIC PARTY		
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name GRAYSON COUNTY DEMOCRATIC PARTY		
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 362/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name GRAYSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name GRAYSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name GRAYSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$86.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 363/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name GRAYSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code P.O. BOX 2141 SHERMAN, TX 75091
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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Amount (\$) \$52.82	Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 364/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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6 Amount (\$) \$67.22	7 Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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Amount (\$) \$52.82	Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 365/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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6 Amount (\$) \$101.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GREATER HEIGHTS DEMOCRATIC CLUB
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2017 SHEARN STREET HOUSTON, TX 77007
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name GREGG COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LONGVIEW, TX 75606
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 366/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name GREGG COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1011 LONGVIEW, TX 75606
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name GREGG COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LONGVIEW, TX 75606
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GREGG COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1011 LONGVIEW, TX 75606
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 367/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name GREGG COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1011 LONGVIEW, TX 75606
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name GREGORY, FREDERICK
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5003 POINTCLEAR COURT ARLINGTON, TX 76017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GROUND GAME TEXAS PAC
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Amount (\$) \$711.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 368/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name GROUND GAME TEXAS PAC	
6 Amount (\$) \$1,961.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name GROUND GAME TEXAS PAC	
Amount (\$) \$97.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name GROUND GAME TEXAS PAC	
Amount (\$) \$199.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 369/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name GROUND GAME TEXAS PAC
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6 Amount (\$) \$236.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GROUND GAME TEXAS PAC
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Amount (\$) \$316.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name GROUND GAME TEXAS PAC
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Amount (\$) \$212.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 370/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name GROUND GAME TEXAS PAC	
6 Amount (\$) \$152.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name GROUND GAME TEXAS PAC	
Amount (\$) \$177.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name GROUND GAME TEXAS PAC	
Amount (\$) \$332.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 371/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name GROUND GAME TEXAS PAC	
6 Amount (\$) \$33.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 383 MANCHACA, TX 78652-9998	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB	
Amount (\$) \$134.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 372/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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6 Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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Amount (\$) \$134.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 373/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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6 Amount (\$) \$52.82	7 Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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Amount (\$) \$57.61	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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Amount (\$) \$28.81	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 374/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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6 Amount (\$) \$81.63	7 Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name GUADALUPE COUNTY DEMOCRATIC CLUB
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Amount (\$) \$48.02	Payee address; City; State; Zip Code PO BOX 2501 SEGUIN, TX 78156
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name GUADALUPE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$160.38	Payee address; City; State; Zip Code P. O. BOX 1034 SEGUIN, TX 78156-1034
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 375/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name GUADALUPE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 1034 SEGUIN, TX 78156-1034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name GUADALUPE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1034 SEGUIN, TX 78156-1034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name GUADALUPE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1034 SEGUIN, TX 78156-1034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 376/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name GUADALUPE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 1034 SEGUIN, TX 78156-1034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name GUADALUPE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 1034 SEGUIN, TX 78156-1034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2024	Payee name GUIDEN, ZARA
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Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8440 N SAM HOUSTON PKWY E HUMBLE, TX 77396
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 377/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name HANDELMAN, BARBARA
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 24 BULLOCK RD NORWICH, VT 05055
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HANNAH BOHM CAMPAIGN ACCOUNT
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Amount (\$) \$216.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1005 SPANISH TRAIL DR GRANBURY, TX 76048
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name HANNAH BOHM CAMPAIGN ACCOUNT
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1005 SPANISH TRAIL DR GRANBURY, TX 76048
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 378/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name HANNAH BOHM CAMPAIGN ACCOUNT	
6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1005 SPANISH TRAIL DR GRANBURY, TX 76048	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name HANNAH BOHM CAMPAIGN ACCOUNT	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1005 SPANISH TRAIL DR GRANBURY, TX 76048	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name HAROLD V. DUTTON FOR TEXAS STATE HOUSE	
Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4001 JEWETT STREET HOUSTON, TX 77026	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 379/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name HARRIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$548.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name HARRIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$761.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HARRIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$115.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 380/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name HARRIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$12.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name HARRIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name HARRIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 381/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name HARRIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$43.21	7 Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name HARRIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$2.88	Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name HARRIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.00	Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 382/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name HARRIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4619 LYONS AVENUE HOUSTON, TX 77020
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HARRIS COUNTY STRONG PAC
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Amount (\$) \$12,966.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name HARRIS COUNTY STRONG PAC
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Amount (\$) \$24,973.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 383/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name HARRIS COUNTY STRONG PAC
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6 Amount (\$) \$4,802.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name HARRIS COUNTY TEJANO DEMOCRATS
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3213 HOUSTON AVE. HOUSTON, TX 77009
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HAVA FOR TEXAS HD106
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Amount (\$) \$182.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2230 JAGUAR DR FRISCO, TX 75033
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 384/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name HAVA FOR TEXAS HD106	
6 Amount (\$) \$118.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2230 JAGUAR DR FRISCO, TX 75033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name HAVA FOR TEXAS HD106	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2230 JAGUAR DR FRISCO, TX 75033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name HAVA FOR TEXAS HD106	
Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2230 JAGUAR DR FRISCO, TX 75033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 385/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
6 Amount (\$) \$3,149.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
Amount (\$) \$264.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
Amount (\$) \$230.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 386/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE
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6 Amount (\$) \$365.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE
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Amount (\$) \$57.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE
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Amount (\$) \$128.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 387/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
6 Amount (\$) \$201.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
Amount (\$) \$873.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
Amount (\$) \$245.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 388/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
6 Amount (\$) \$75.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name HAYS COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE	
Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 204 SAN MARCOS, TX 78667	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name HAYS COUNTY YOUNG DEMOCRATS	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 389/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name HAYS COUNTY YOUNG DEMOCRATS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HAYS COUNTY YOUNG DEMOCRATS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name HAYS COUNTY YOUNG DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 390/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name HAYS COUNTY YOUNG DEMOCRATS	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name HAYS COUNTY YOUNG DEMOCRATS	
Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name HAYS COUNTY YOUNG DEMOCRATS	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1391 KYLE, TX 78640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 391/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 392/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE	
6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 393/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name HD89 DEMOCRATS CLUB POLITICAL ACTION COMMITTEE	
6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2402 ALLEN, TX 75013-8043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name HELLER, JUDY	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3335 NE 32ND AVENUE PORTLAND, OR 97212	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name HELLER, JUDY	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3335 NE 32ND AVENUE PORTLAND, OR 97212	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 394/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name HENDERSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name HENDERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$34.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name HENDERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 395/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name HENDERSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name HENDERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name HENDERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 396/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name HENDERSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name HENDERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name HENDERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.BOX 764 517 E CORSICANA STREET ATHENS, TX 75751
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 397/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name HER BOLD MOVE - TEXAS
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6 Amount (\$) \$1,048.29 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code ONE PARK ROW 5TH FLOOR PROVIDENCE, RI 02903
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name HER BOLD MOVE - TEXAS
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Amount (\$) \$320.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code ONE PARK ROW 5TH FLOOR PROVIDENCE, RI 02903
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$737.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 398/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$518.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 399/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$86.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 400/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name HIDALGO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POB 4585 MCALLEN, TX 78502-4585
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HILL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 401/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name HILL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$38.41	7 Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HILL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01	Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name HILL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$38.41	Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 402/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name HILL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name HILL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name HILL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 403/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name HILL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1554 HILLSBORO, TX 76645
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name HINDS, JANICE
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 82 SCHENECTADY AVE WEST BABYLON, NY 11704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HOOD COUNTY DEMOCRATIC CLUB
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 404/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name HOOD COUNTY DEMOCRATIC CLUB
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name HOOD COUNTY DEMOCRATIC CLUB
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name HOOD COUNTY DEMOCRATIC CLUB
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 405/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name HOOD COUNTY DEMOCRATIC CLUB	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name HOOD COUNTY DEMOCRATIC CLUB	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name HOOD COUNTY DEMOCRATIC CLUB	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6751 GRANBURY, TX 76049	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 406/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Payee name HORWITZ, SANDY	
6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6155 BANDERA AV DALLAS, TX 75225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name HOUSTON BLACK AMERICAN DEMOCRATS PAC	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 88374 HOUSTON, TX 77228	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name HOUSTON BLACK AMERICAN DEMOCRATS PAC	
Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 88374 HOUSTON, TX 77228	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 407/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name HOUSTON BLACK AMERICAN DEMOCRATS PAC	
6 Amount (\$) \$288.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 88374 HOUSTON, TX 77228	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name HOUSTON BLACK AMERICAN DEMOCRATS PAC	
Amount (\$) \$288.13 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 88374 HOUSTON, TX 77228	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2024	Candidate/Officeholder name HOUSTON BLACK AMERICAN DEMOCRATS PAC	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 88374 HOUSTON, TX 77228	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 408/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name HOUSTON BLACK AMERICAN DEMOCRATS PAC
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6 Amount (\$) \$336.15 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 88374 HOUSTON, TX 77228
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name HOUSTON BLACK AMERICAN DEMOCRATS PAC
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Amount (\$) \$288.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 88374 HOUSTON, TX 77228
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name HOUSTON BLACK AMERICAN DEMOCRATS PAC
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 88374 HOUSTON, TX 77228
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 409/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name HOUSTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 166 CROCKETT, TX 75835
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HOUSTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 166 CROCKETT, TX 75835
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name HOUSTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 166 CROCKETT, TX 75835
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 410/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name HOUSTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 166 CROCKETT, TX 75835
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name HOUSTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 166 CROCKETT, TX 75835
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HOUSTON LGBTQ+ POLITICAL CAUCUS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POST OFFICE BOX 66664 HOUSTON, TX 77266-6664
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 411/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name HOUSTON LGBTQ+ POLITICAL CAUCUS	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code POST OFFICE BOX 66664 HOUSTON, TX 77266-6664	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name HOUSTON LGBTQ+ POLITICAL CAUCUS	
Amount (\$) \$28.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POST OFFICE BOX 66664 HOUSTON, TX 77266-6664	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name HOUSTON LGBTQ+ POLITICAL CAUCUS	
Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code POST OFFICE BOX 66664 HOUSTON, TX 77266-6664	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 412/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/02/2024	5 Payee name HULL, PAT	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5808 ARBOR RD NORTH RICHLAND HILLS, TX 76180	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name HULL, PAT	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5808 ARBOR RD NORTH RICHLAND HILLS, TX 76180	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name HULL, PAT	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5808 ARBOR RD NORTH RICHLAND HILLS, TX 76180	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 413/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/04/2024	5 Payee name HULL, PAT
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6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5808 ARBOR RD NORTH RICHLAND HILLS, TX 76180
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name HULL, PAT
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Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5808 ARBOR RD NORTH RICHLAND HILLS, TX 76180
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HUMBLE AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 414/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name HUMBLE AREA DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name HUMBLE AREA DEMOCRATS
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Amount (\$) \$67.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name HUMBLE AREA DEMOCRATS
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Amount (\$) \$283.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 415/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name HUMBLE AREA DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name HUMBLE AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name HUMBLE AREA DEMOCRATS
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Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 416/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name HUMBLE AREA DEMOCRATS
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 3863 HUMBLE, TX 77338
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name HUNT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name HUNT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 417/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name HUNT COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$100.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2024	Candidate/Officeholder name HUNT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5292 FM 2874 COMMERCE, TX 75428	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name HUNT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5292 FM 2874 COMMERCE, TX 75428	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 418/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name HUNT COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$86.44	7 Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name HUNT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$302.52	Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name HUNT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 419/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name HUNT COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name HUNT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name HUNT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5292 FM 2874 COMMERCE, TX 75428
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 420/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/09/2024	5 Payee name IMBODEN, ANNE
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 421/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/09/2024	5 Payee name IMBODEN, ANNE
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6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 422/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/09/2024	5 Payee name IMBODEN, ANNE
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 423/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/09/2024	5 Payee name IMBODEN, ANNE
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/09/2024	Payee name IMBODEN, ANNE
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Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 111 W LAKE AVE BALTIMORE, MD 21210-1305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 424/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name INDIGENOUS PEOPLES CAUCUS OF THE TEXAS DEMOCRATIC PARTY
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 206 CAMBRIDGE LN ATTN AL DURANTE IPC TREASURER LONGVIEW, TX 75601
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name INDIGENOUS PEOPLES CAUCUS OF THE TEXAS DEMOCRATIC PARTY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CAMBRIDGE LN ATTN AL DURANTE IPC TREASURER LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name INDIGENOUS PEOPLES CAUCUS OF THE TEXAS DEMOCRATIC PARTY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CAMBRIDGE LN ATTN AL DURANTE IPC TREASURER LONGVIEW, TX 75601
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 425/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name INNENBERG, ROBERTA
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 19532 HANELY ST APPLE VALLEY, CA 92308
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name IVAN NINO CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name IVAN NINO CAMPAIGN
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Amount (\$) \$1,258.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 426/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name IVAN NINO CAMPAIGN
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6 Amount (\$) \$96.05	7 Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name IVAN NINO CAMPAIGN
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Amount (\$) \$4,322.24	Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name IVAN NINO CAMPAIGN
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Amount (\$) \$816.42	Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 427/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name IVAN NINO CAMPAIGN
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6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name IVAN NINO CAMPAIGN
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name IVAN NINO CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3620 TIERRA ALBA EL PASO, TX 79938
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 428/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JACKIE ARROYO BUTLER CAMPAIGN
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6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 962894 EL PASO, TX 79996
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name JAEKEL, RICHARD
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Amount (\$) \$4.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 528 GRANADA GARLAND, TX 75043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JAMES TALARICO CAMPAIGN
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Amount (\$) \$1,753.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 429/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JAMES TALARICO CAMPAIGN
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6 Amount (\$) \$11,372.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name JAMES TALARICO CAMPAIGN
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Amount (\$) \$753.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JAMES TALARICO CAMPAIGN
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Amount (\$) \$1,139.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 430/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name JAMES TALARICO CAMPAIGN
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6 Amount (\$) \$1,483.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name JAMES TALARICO CAMPAIGN
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Amount (\$) \$6,921.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name JAMES TALARICO CAMPAIGN
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Amount (\$) \$2,255.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 431/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name JAMES TALARICO CAMPAIGN
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6 Amount (\$) \$12,248.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JAMES TALARICO CAMPAIGN
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Amount (\$) \$51,718.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15207 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JAWORSKI FOR TEXAS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2228 MECHANIC ST. SUITE 307 GALVESTON, TX 77550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 432/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name JAWORSKI FOR TEXAS	
6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2228 MECHANIC ST. SUITE 307 GALVESTON, TX 77550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name JEFF DAVIS COUNTY DEMOCRATS	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 79 FORT DAVIS, TX 79734	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name JEFF DAVIS COUNTY DEMOCRATS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 79 FORT DAVIS, TX 79734	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 433/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name JEFF DAVIS COUNTY DEMOCRATS	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 79 FORT DAVIS, TX 79734	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name JEFF DAVIS COUNTY DEMOCRATS	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 79 FORT DAVIS, TX 79734	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$293.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 434/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$393.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$563.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$240.09 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 435/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name JEFFERSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$197.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$278.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$801.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 436/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$198.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$245.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$182.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 437/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name JEFFERSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 2211 CALDER AVE. BEAUMONT, TX 77701
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JENN FOR HD10
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 721 MASON LANE WAXAHACHIE, TX 75167
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$1,366.04	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 438/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Payee name JENNIFER LEE FOR HD55	
6 Amount (\$) \$2,943.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name JENNIFER LEE FOR HD55	
Amount (\$) \$2,122.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name JENNIFER LEE FOR HD55	
Amount (\$) \$472.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 439/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/31/2024	5 Payee name JENNIFER LEE FOR HD55
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6 Amount (\$) \$843.92	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$3,049.39	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$577.17	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 440/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name JENNIFER LEE FOR HD55
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6 Amount (\$) \$470.59	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$57.77	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/11/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 441/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/14/2024	5 Payee name JENNIFER LEE FOR HD55	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name JENNIFER LEE FOR HD55	
Amount (\$) \$50.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name JENNIFER LEE FOR HD55	
Amount (\$) \$0.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 442/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/20/2024	5 Payee name JENNIFER LEE FOR HD55
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6 Amount (\$) \$1.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$5.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 443/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name JENNIFER LEE FOR HD55
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6 Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/10/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$3.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 444/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/11/2024	5 Payee name JENNIFER LEE FOR HD55
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$1.99	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 445/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name JENNIFER LEE FOR HD55
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6 Amount (\$) \$11.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$5.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name JENNIFER LEE FOR HD55
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 OLAF DR. UNIT B TEMPLE, TX 76504
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 446/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name JEREMY DAVIS CAMPAIGN
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6 Amount (\$) \$2,521.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 72 WACO, TX 76703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name JEREMY DAVIS CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 72 WACO, TX 76703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name JEREMY DAVIS CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 72 WACO, TX 76703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 447/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JESSICA GONZALEZ CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 501 E 8TH STREET DALLAS, TX 75203
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name JESSICA GONZALEZ CAMPAIGN
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Amount (\$) \$1,422.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 501 E 8TH STREET DALLAS, TX 75203
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name JESSICA GONZALEZ CAMPAIGN
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Amount (\$) \$1,685.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 501 E 8TH STREET DALLAS, TX 75203
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 448/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name JESSICA GONZALEZ CAMPAIGN
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6 Amount (\$) \$6,571.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 501 E 8TH STREET DALLAS, TX 75203
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name JESSICA GONZALEZ CAMPAIGN
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Amount (\$) \$4,043.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 501 E 8TH STREET DALLAS, TX 75203
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JESSICA GONZALEZ CAMPAIGN
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Amount (\$) \$4,423.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 501 E 8TH STREET DALLAS, TX 75203
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 449/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name JOHN BRYANT CAMPAIGN	
6 Amount (\$) \$384.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 140152 DALLAS, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name JOHN BRYANT CAMPAIGN	
Amount (\$) \$288.14 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 140152 DALLAS, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/05/2024	Candidate/Officeholder name JOHN BRYANT CAMPAIGN	
Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 140152 DALLAS, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 450/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name JOHN BRYANT CAMPAIGN	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 140152 DALLAS, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name JOHN BRYANT CAMPAIGN	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 140152 DALLAS, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name JOHN BUCY CAMPAIGN	
Amount (\$) \$272.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 451/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JOHN BUCY CAMPAIGN
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6 Amount (\$) \$898.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name JOHN BUCY CAMPAIGN
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JOHN BUCY CAMPAIGN
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Amount (\$) \$100.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 452/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name JOHN BUCY CAMPAIGN	
6 Amount (\$) \$115.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name JOHN BUCY CAMPAIGN	
Amount (\$) \$100.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name JOHN BUCY CAMPAIGN	
Amount (\$) \$219.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 453/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name JOHN BUCY CAMPAIGN	
6 Amount (\$) \$124.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name JOHN BUCY CAMPAIGN	
Amount (\$) \$5,268.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 536 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name JOHN C CREUZOT CAMPAIGN	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181268 DALLAS, TX 75218	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 454/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name JOHN C CREUZOT CAMPAIGN	
6 Amount (\$) \$29,295.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 181268 DALLAS, TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name JOHNSON, BILL	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 211 SILENTBLUFF DRIVE SAN ANTONIO, TX 78216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name JOLANDA JONES CAMPAIGN	
Amount (\$) \$1,440.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10709 MARSHA LANE HOUSTON, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 455/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name JOLANDA JONES CAMPAIGN
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6 Amount (\$) \$624.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10709 MARSHA LANE HOUSTON, TX 77024
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JOLANDA JONES CAMPAIGN
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Amount (\$) \$5,426.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10709 MARSHA LANE HOUSTON, TX 77024
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JON ROSENTHAL FOR TEXAS
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Amount (\$) \$528.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 456/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JON ROSENTHAL FOR TEXAS
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6 Amount (\$) \$110.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JON ROSENTHAL FOR TEXAS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name JON ROSENTHAL FOR TEXAS
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Amount (\$) \$120.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 457/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name JON ROSENTHAL FOR TEXAS
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6 Amount (\$) \$110.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name JON ROSENTHAL FOR TEXAS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JON ROSENTHAL FOR TEXAS
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Amount (\$) \$792.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667204 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 458/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name JONATHAN DWAYNE GRACIA
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6 Amount (\$) \$1,450.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name JONATHAN DWAYNE GRACIA
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Amount (\$) \$1,697.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name JONATHAN DWAYNE GRACIA
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 459/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name JONATHAN DWAYNE GRACIA	
6 Amount (\$) \$15.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name JONATHAN DWAYNE GRACIA	
Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name JONATHAN DWAYNE GRACIA	
Amount (\$) \$0.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 460/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name JONATHAN DWAYNE GRACIA
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6 Amount (\$) \$5.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name JONATHAN DWAYNE GRACIA
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Amount (\$) \$2.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JONATHAN DWAYNE GRACIA
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Amount (\$) \$8.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 461/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name JONATHAN DWAYNE GRACIA
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6 Amount (\$) \$1.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 932 E VAN BUREN ST BROWNSVILLE, TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name JORDAN, GIDGET
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Amount (\$) \$80.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2309 APOLLO ROAD 622 GARLAND, TX 75044
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$1,978.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 462/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JOSE GARZA CAMPAIGN
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6 Amount (\$) \$244.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$11.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$312.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 463/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name JOSE GARZA CAMPAIGN
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6 Amount (\$) \$110.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$120.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 464/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name JOSE GARZA CAMPAIGN
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6 Amount (\$) \$45.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$1,719.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 465/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name JOSE GARZA CAMPAIGN
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6 Amount (\$) \$273.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name JOSE GARZA CAMPAIGN
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Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 303097 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JOSEPH E. MOODY CAMPAIGN
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Amount (\$) \$9,701.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 920827 EL PASO, TX 79902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 466/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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6 Amount (\$) \$3,390.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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Amount (\$) \$623.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 467/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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6 Amount (\$) \$1,018.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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Amount (\$) \$1,200.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 468/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name JOSEY GARCIA FOR TEXAS HOUSE 124
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6 Amount (\$) \$1,565.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 718 AMBER KNOLL SAN ANTONIO, TX 78251
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JOY MORRIS PARDO FOR TAX ASSESSOR COLLECTOR
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 524 MOCKINGBIRD LN LOCKHART, TX 78644
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JULIE SANDERS CAMPAIGN FUND
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1214 DAWN RIDGE DRIVE CANYON LAKE, TX 78133
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 469/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name JULIE SANDERS CAMPAIGN FUND
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6 Amount (\$) \$20.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1214 DAWNDRIDGE DRIVE CANYON LAKE, TX 78133
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name JULIE SANDERS CAMPAIGN FUND
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1214 DAWNDRIDGE DRIVE CANYON LAKE, TX 78133
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name JULIE SANDERS CAMPAIGN FUND
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Amount (\$) \$20.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1214 DAWNDRIDGE DRIVE CANYON LAKE, TX 78133
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 470/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name JULIE SANDERS CAMPAIGN FUND
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1214 DAWNRIERGE DRIVE CANYON LAKE, TX 78133
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name JUSTICIA FRONTERIZA PAC
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Amount (\$) \$11.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name JUSTICIA FRONTERIZA PAC
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Amount (\$) \$49.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 471/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name JUSTICIA FRONTERIZA PAC
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name JUSTICIA FRONTERIZA PAC
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Amount (\$) \$1.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name JUSTICIA FRONTERIZA PAC
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Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 472/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name JUSTICIA FRONTERIZA PAC
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6 Amount (\$) \$49.93	7 Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name JUSTICIA FRONTERIZA PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name JUSTICIA FRONTERIZA PAC
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Amount (\$) \$1.92	Payee address; City; State; Zip Code 1535 RAPHAEL CIRCLE EL PASO, TX 79936
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 473/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name JUSTIN RODRIGUEZ CAMPAIGN	
6 Amount (\$) \$1,440.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 100153 SAN ANTONIO, TX 78201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2024	Candidate/Officeholder name JUSTIN RODRIGUEZ CAMPAIGN	
Amount (\$) \$8,644.49 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 100153 SAN ANTONIO, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2024	Candidate/Officeholder name JUSTIN RODRIGUEZ CAMPAIGN	
Amount (\$) \$1,440.75 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 100153 SAN ANTONIO, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 474/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name JUSTIN RODRIGUEZ CAMPAIGN
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6 Amount (\$) \$2,401.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 100153 SAN ANTONIO, TX 78201
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name JUSTIN RODRIGUEZ CAMPAIGN
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 100153 SAN ANTONIO, TX 78201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name K T SMITH CAMPAIGN
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Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9315 HODGES BEND DR HOUSTON, TX 77083
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 475/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name K, A
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 17 4 VASSAR CIRCLE VILLANOVA, PA 19085
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$1,025.90	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$340.67	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 476/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name KATHERINE CULBERT CAMPAIGN
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6 Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$26.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 477/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name KATHERINE CULBERT CAMPAIGN
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6 Amount (\$) \$3.67	7 Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 478/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name KATHERINE CULBERT CAMPAIGN
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6 Amount (\$) \$50.42	7 Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$3.67	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name KATHERINE CULBERT CAMPAIGN
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 915 FRANKLIN ST UNIT 4N HOUSTON, TX 77002
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 479/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name KATHY CHENG CAMPAIGN	
6 Amount (\$) \$129.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 27397 HOUSTON, TX 77227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name KATHY CHENG CAMPAIGN	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 27397 HOUSTON, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name KATHY CHENG CAMPAIGN	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 27397 HOUSTON, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 480/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name KATHY CHENG CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 27397 HOUSTON, TX 77227
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KATY AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6205 MALLARD DR. KATY, TX 77493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KATY AREA DEMOCRATS
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Amount (\$) \$0.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6205 MALLARD DR. KATY, TX 77493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 481/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name KATY AREA DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6205 MALLARD DR. KATY, TX 77493
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name KATY AREA DEMOCRATS
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Amount (\$) \$0.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6205 MALLARD DR. KATY, TX 77493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name KATY AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6205 MALLARD DR. KATY, TX 77493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 482/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name KATY JEWETT MEMORIAL TRAINING FUND
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KATY JEWETT MEMORIAL TRAINING FUND
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KATY JEWETT MEMORIAL TRAINING FUND
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 483/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name KATY JEWETT MEMORIAL TRAINING FUND
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6 Amount (\$) \$218.98	7 Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name KATY JEWETT MEMORIAL TRAINING FUND
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Amount (\$) \$144.07	Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name KATY JEWETT MEMORIAL TRAINING FUND
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Amount (\$) \$202.65	Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 484/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name KATY JEWETT MEMORIAL TRAINING FUND
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6 Amount (\$) \$96.05	7 Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name KATY JEWETT MEMORIAL TRAINING FUND
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Amount (\$) \$972.98	Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name KATY JEWETT MEMORIAL TRAINING FUND
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 8503 HATTON HOUSTON, TX 77025
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 485/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name KAUFMAN COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 207 STONEGATE TERRELL, TX 75160
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KAUFMAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$134.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 207 STONEGATE TERRELL, TX 75160
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name KAUFMAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 207 STONEGATE TERRELL, TX 75160
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 486/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name KAUFMAN COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 207 STONEGATE TERRELL, TX 75160
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name KAUFMAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$76.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 207 STONEGATE TERRELL, TX 75160
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name KAUFMAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 207 STONEGATE TERRELL, TX 75160
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 487/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name KENDALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$134.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$206.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$144.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 488/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name KENDALL COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$144.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY	
Amount (\$) \$168.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 489/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name KENDALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$110.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$129.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$153.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 490/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name KENDALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$62.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name KENDALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$120.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2321 BOERNE, TX 78006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$169.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 491/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name KERR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$355.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$172.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 492/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name KERR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$178.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$201.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$211.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 493/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name KERR COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$245.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name KERR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 290614 KERRVILLE, TX 78029
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 494/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name KINGWOOD AREA DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KINGWOOD AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KINGWOOD AREA DEMOCRATS
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 495/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name KINGWOOD AREA DEMOCRATS
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name KINGWOOD AREA DEMOCRATS
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Amount (\$) \$9.60	Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name KINGWOOD AREA DEMOCRATS
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Amount (\$) \$48.02	Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 496/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name KINGWOOD AREA DEMOCRATS
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6 Amount (\$) \$67.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name KINGWOOD AREA DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 6177 KINGWOOD, TX 77325-6177
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name KLEBERG CO DEMOCRATIC PARTY
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Amount (\$) \$340.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 917 HALL AVE KINGSVILLE, TX 78363
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 497/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name KLEBERG CO DEMOCRATIC PARTY	
6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 917 HALL AVE KINGSVILLE, TX 78363	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name KLEBERG CO DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 917 HALL AVE KINGSVILLE, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name KLEBERG CO DEMOCRATIC PARTY	
Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 917 HALL AVE KINGSVILLE, TX 78363	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 498/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name KLEBERG CO DEMOCRATIC PARTY
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 917 HALL AVE KINGSVILLE, TX 78363
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name KLEBERG CO DEMOCRATIC PARTY
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Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 917 HALL AVE KINGSVILLE, TX 78363
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KP GEORGE CAMPAIGN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 18711 SUGAR LAND, TX 77496
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 499/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name KP GEORGE CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 18711 SUGAR LAND, TX 77496
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name KP GEORGE CAMPAIGN
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 18711 SUGAR LAND, TX 77496
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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Amount (\$) \$142.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 500/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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6 Amount (\$) \$182.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 501/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 502/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name KRISTEN WASHINGTON FOR TEXAS STATE REPRESENTATIVE
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 3404 ONEAL STREET GREENVILLE, TX 75401
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name KRISTIAN CARRANZA FOR TEXAS
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Amount (\$) \$47,709.05	Payee address; City; State; Zip Code P.O. BOX 831436 SAN ANTONIO, TX 78283
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name KRISTIAN CARRANZA FOR TEXAS
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Amount (\$) \$28,387.14	Payee address; City; State; Zip Code P.O. BOX 831436 SAN ANTONIO, TX 78283
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 503/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name KRISTIAN CARRANZA FOR TEXAS
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6 Amount (\$) \$567.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 831436 SAN ANTONIO, TX 78283
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KRISTIAN CARRANZA FOR TEXAS
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Amount (\$) \$152.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 831436 SAN ANTONIO, TX 78283
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name KRISTIAN CARRANZA FOR TEXAS
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Amount (\$) \$172.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 831436 SAN ANTONIO, TX 78283
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 504/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name KRISTIAN CARRANZA FOR TEXAS
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6 Amount (\$) \$33.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 831436 SAN ANTONIO, TX 78283
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name KYLE-BUDA AREA DEMOCRATS
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Amount (\$) \$49.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1189 BUDA, TX 78610
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name KYLE-BUDA AREA DEMOCRATS
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Amount (\$) \$59.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1189 BUDA, TX 78610
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 505/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name KYLE-BUDA AREA DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1189 BUDA, TX 78610
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name KYLE-BUDA AREA DEMOCRATS
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Amount (\$) \$69.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1189 BUDA, TX 78610
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 506/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 507/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name LAMPASAS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 508/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name LAMPASAS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1115 LAMPASAS, TX 76550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2024	Candidate/Officeholder name LAMPASAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 1115 LAMPASAS, TX 76550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2024	Candidate/Officeholder name LANE, CONSTANCE	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 4468 GEORGE OAKS DRIVE SAN JOSE, CA 95118	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 509/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name LATINAS UNITED PAC	
6 Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2314 TANNEHILL DRIVE HOUSTON, TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name LATINAS UNITED PAC	
Amount (\$) \$307.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2314 TANNEHILL DRIVE HOUSTON, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name LATINAS UNITED PAC	
Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2314 TANNEHILL DRIVE HOUSTON, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 510/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name LATINAS UNITED PAC
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6 Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2314 TANNEHILL DRIVE HOUSTON, TX 77008
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name LAURA LEEMAN CAMPAIGN
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Amount (\$) \$4,090.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name LAURA LEEMAN CAMPAIGN
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Amount (\$) \$1,611.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 511/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name LAURA LEEMAN CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name LAURA LEEMAN CAMPAIGN
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LAURA LEEMAN CAMPAIGN
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 512/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name LAURA LEEMAN CAMPAIGN	
6 Amount (\$) \$120.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name LAURA LEEMAN CAMPAIGN	
Amount (\$) \$92.19 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name LAURA LEEMAN CAMPAIGN	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 513/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name LAURA LEEMAN CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name LAURA LEEMAN CAMPAIGN
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Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name LAURA LEEMAN CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 729 GRAPEVINE HWY PMB 473 HURST, TX 76054
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 514/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name LAUREL SWIFT 4TEXAS
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6 Amount (\$) \$21,614.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name LAUREL SWIFT 4TEXAS
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Amount (\$) \$14,499.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name LAUREL SWIFT 4TEXAS
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Amount (\$) \$385.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 515/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name LAUREL SWIFT 4TEXAS	
6 Amount (\$) \$97.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name LAUREL SWIFT 4TEXAS	
Amount (\$) \$39.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name LAUREL SWIFT 4TEXAS	
Amount (\$) \$33.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 516/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name LAUREL SWIFT 4TEXAS
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6 Amount (\$) \$30.73 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name LAUREL SWIFT 4TEXAS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7627 WOODRIDGE DR SAN ANTONIO, TX 78209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$345.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 517/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/28/2024	5 Payee name LAUREN SIMMONS CAMPAIGN	
6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2024	Candidate/Officeholder name LAUREN SIMMONS CAMPAIGN	
Amount (\$) \$631.01 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2024	Candidate/Officeholder name LAUREN SIMMONS CAMPAIGN	
Amount (\$) \$470.61 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 518/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/31/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$6,103.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 519/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$105.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/11/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$552.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/12/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$23.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 520/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/13/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$1,032.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$12,063.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 521/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/18/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$965.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/20/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$1,464.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 522/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/21/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$1,680.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$264.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 523/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/26/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 524/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name LAUREN SIMMONS CAMPAIGN	
6 Amount (\$) \$51.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name LAUREN SIMMONS CAMPAIGN	
Amount (\$) \$148.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name LAUREN SIMMONS CAMPAIGN	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 525/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/05/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$3,842.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$1,056.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/09/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$1,969.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 526/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/10/2024	5 Payee name LAUREN SIMMONS CAMPAIGN
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6 Amount (\$) \$384.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$1,415.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name LAUREN SIMMONS CAMPAIGN
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Amount (\$) \$1,670.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 527/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name LAUREN SIMMONS CAMPAIGN	
6 Amount (\$) \$2,823.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name LEE COUNTY TEXAS DEMOCRATIC PARTY	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 COUNTY RD B LEXINGTON, TX 78947	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name LEE COUNTY TEXAS DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 COUNTY RD B LEXINGTON, TX 78947	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 528/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name LEE COUNTY TEXAS DEMOCRATIC PARTY	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1411 COUNTY RD B LEXINGTON, TX 78947	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name LEE COUNTY TEXAS DEMOCRATIC PARTY	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1411 COUNTY RD B LEXINGTON, TX 78947	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name LESLEY BRIONES CAMPAIGN	
Amount (\$) \$28,184.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 529/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name LESLEY BRIONES CAMPAIGN
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6 Amount (\$) \$4,682.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name LESLEY BRIONES CAMPAIGN
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LESLEY BRIONES CAMPAIGN
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Amount (\$) \$2,689.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 530/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name LESLEY BRIONES CAMPAIGN	
6 Amount (\$) \$30,532.35 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name LESLEY BRIONES CAMPAIGN	
Amount (\$) \$3,198.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name LESLEY BRIONES CAMPAIGN	
Amount (\$) \$26,119.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 531/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name LESLEY BRIONES CAMPAIGN	
6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name LESLEY BRIONES CAMPAIGN	
Amount (\$) \$19,488.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name LESLEY BRIONES CAMPAIGN	
Amount (\$) \$9,648.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 532/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name LESLEY BRIONES CAMPAIGN	
6 Amount (\$) \$18,377.15 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name LEVINSON, REBECCA	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 332 EAST 6 ST APT #3 NEW YORK, NY 10003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name LI, YING	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 46 ESPARITO PL FREMONT, CA 95539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 533/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name LIBERAL AUSTIN DEMOCRATS	
6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1101 GROVE BLVD. APT 703 AUSTIN, TX 78741	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name LIBERAL AUSTIN DEMOCRATS	
Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1101 GROVE BLVD. APT 703 AUSTIN, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name LIBERAL AUSTIN DEMOCRATS	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1101 GROVE BLVD. APT 703 AUSTIN, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 534/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name LIBERAL AUSTIN DEMOCRATS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1101 GROVE BLVD. APT 703 AUSTIN, TX 78741
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name LIMESTONE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$62.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 759 LCR 779 GROESBECK, TX 76642
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name LIMESTONE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 759 LCR 779 GROESBECK, TX 76642
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 535/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name LIMESTONE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 759 LCR 779 GROESBECK, TX 76642
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name LIMESTONE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 759 LCR 779 GROESBECK, TX 76642
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name LIMESTONE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 759 LCR 779 GROESBECK, TX 76642
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 536/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name LIMESTONE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 759 LCR 779 GROESBECK, TX 76642	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY	
Amount (\$) \$6,325.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY	
Amount (\$) \$1,153.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 537/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name LINA HIDALGO FOR HARRIS COUNTY
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6 Amount (\$) \$320.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY
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Amount (\$) \$189.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY
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Amount (\$) \$1,547.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 538/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name LINA HIDALGO FOR HARRIS COUNTY
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6 Amount (\$) \$1,814.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY
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Amount (\$) \$320.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY
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Amount (\$) \$216.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 539/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name LINA HIDALGO FOR HARRIS COUNTY
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6 Amount (\$) \$22,370.91	7 Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY
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Amount (\$) \$482.84	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name LINA HIDALGO FOR HARRIS COUNTY
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Amount (\$) \$5,051.00	Payee address; City; State; Zip Code PO BOX 88392 HOUSTON, TX 77288
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 540/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name LINDA FOR TEXAS
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6 Amount (\$) \$2,454.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name LINDA FOR TEXAS
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Amount (\$) \$1,830.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name LINDA FOR TEXAS
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Amount (\$) \$85.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 541/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name LINDA FOR TEXAS
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6 Amount (\$) \$49.94	7 Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LINDA FOR TEXAS
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Amount (\$) \$1,921.00	Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name LINDA FOR TEXAS
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Amount (\$) \$34.28	Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 542/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name LINDA FOR TEXAS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name LINDA FOR TEXAS
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Amount (\$) \$2,343.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1908 HADDOCK DRIVE MESQUITE, TX 75149
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LIVE OAK COUNTY DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 712 FM 1358 THREE RIVERS, TX 78071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 543/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name LIVE OAK COUNTY DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 712 FM 1358 THREE RIVERS, TX 78071
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name LLOYD, PATRICIA
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 33435 206TH AVENUE SOUTHEAST AUBURN, WA 98092
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/29/2024	Payee name LONE STAR PROJECT - STATE
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Amount (\$) \$364.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 544/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/31/2024	5 Payee name LONE STAR PROJECT - STATE	
6 Amount (\$) \$9,605.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name LONE STAR PROJECT - STATE	
Amount (\$) \$504.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2024	Payee name LONE STAR PROJECT - STATE	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 545/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Payee name LONE STAR PROJECT - STATE	
6 Amount (\$) \$134.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2024	Payee name LONE STAR PROJECT - STATE	
Amount (\$) \$121.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2024	Payee name LONE STAR PROJECT - STATE	
Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 546/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/12/2024	5 Payee name LONE STAR PROJECT - STATE
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6 Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/19/2024	Payee name LONE STAR PROJECT - STATE
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Amount (\$) \$110.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2024	Payee name LONE STAR PROJECT - STATE
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 547/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name LONE STAR PROJECT - STATE
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6 Amount (\$) \$364.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6 E STREET SE WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name LONG, ELIZABETH
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 698 12 POINT BUCK TRAIL DURANGO, CO 81301-8940
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$259.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 548/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$44.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 549/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$68.19 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 550/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name LUBBOCK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 94035 LUBBOCK, TX 79408
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name LULU FLORES CAMPAIGN
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 40969 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 551/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name LULU FLORES CAMPAIGN
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code PO BOX 40969 AUSTIN, TX 78704
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name LULU FLORES CAMPAIGN
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Amount (\$) \$2,497.30	Payee address; City; State; Zip Code PO BOX 40969 AUSTIN, TX 78704
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name LULU FLORES CAMPAIGN
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Amount (\$) \$48.02	Payee address; City; State; Zip Code PO BOX 40969 AUSTIN, TX 78704
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 552/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name LULU FLORES CAMPAIGN
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6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 40969 AUSTIN, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2024	Payee name LUNDEEN, NANCY
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Amount (\$) \$8.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1535 NW DIXON ST. CORVALLIS, OR 97330
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MADELINE GIBSON FOR PCT.3 COMMISSIONER
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 COUNTY ROAD 3203 QUITMAN, TX 75783
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 553/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name MADELINE GIBSON FOR PCT.3 COMMISSIONER	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 405 COUNTY ROAD 3203 QUITMAN, TX 75783	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name MAKALA4TEXAS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 163 TOWN PL. SUITE 162 FAIRVIEW, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name MAKALA4TEXAS	
Amount (\$) \$54.74 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 163 TOWN PL. SUITE 162 FAIRVIEW, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 554/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name MAKALA4TEXAS	
6 Amount (\$) \$64.35 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 163 TOWN PL. SUITE 162 FAIRVIEW, TX 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name MAKING GOVERNMENT WORK PAC	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5200 GUADALUPE AUSTIN, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name MAKING GOVERNMENT WORK PAC	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5200 GUADALUPE AUSTIN, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 555/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name MARISELA "MJ" JIMENEZ CAMPAIGN ACCOUNT	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3530 PEACHSTONE PL SPRING, TX 77389	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name MARISELA "MJ" JIMENEZ CAMPAIGN ACCOUNT	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3530 PEACHSTONE PL SPRING, TX 77389	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name MARK SALINAS FOR SHERIFF	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2409 KELSON COVE DR TEXAS CITY, TX 77568	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 556/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name MARK SALINAS FOR SHERIFF
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 2409 KELSON COVE DR TEXAS CITY, TX 77568
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MARK SALINAS FOR SHERIFF
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Amount (\$) \$67.23	Payee address; City; State; Zip Code 2409 KELSON COVE DR TEXAS CITY, TX 77568
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MARY ANN G. PEREZ - CAMPAIGN FUND
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Amount (\$) \$246.84	Payee address; City; State; Zip Code 5223 SLEEPY CREEK DR. HOUSTON, TX 77017
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 557/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name MARY ANN G. PEREZ - CAMPAIGN FUND
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5223 SLEEPY CREEK DR. HOUSTON, TX 77017
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MARY ANN G. PEREZ - CAMPAIGN FUND
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Amount (\$) \$2,401.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5223 SLEEPY CREEK DR. HOUSTON, TX 77017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name MARY ANN G. PEREZ - CAMPAIGN FUND
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5223 SLEEPY CREEK DR. HOUSTON, TX 77017
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 558/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name MARY GONZALEZ CAMPAIGN
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6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 450 CLINT, TX 79836
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$302.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 559/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name MCKINNEY AREA DEMOCRATIC CLUB
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6 Amount (\$) \$254.51	7 Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$220.89	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$216.08	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 560/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name MCKINNEY AREA DEMOCRATIC CLUB
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6 Amount (\$) \$182.48	7 Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$158.46	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$201.68	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 561/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name MCKINNEY AREA DEMOCRATIC CLUB
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6 Amount (\$) \$216.08	7 Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$110.45	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name MCKINNEY AREA DEMOCRATIC CLUB
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 5100 ELDORADO PKWY SUITE 102-377 MCKINNEY, TX 75070
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 562/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name MCLENNAN COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$730.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MCLENNAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$860.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name MCLENNAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$437.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 563/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name MCLENNAN COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$211.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MCLENNAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$557.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name MCLENNAN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$764.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 564/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name MCLENNAN COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$979.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name MCLENNAN COUNTY DEMOCRATIC PARTY	
Amount (\$) \$168.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name MCLENNAN COUNTY DEMOCRATIC PARTY	
Amount (\$) \$168.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 565/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name MCLENNAN COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$536.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 23488 WACO, TX 76710	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/31/2024	Candidate/Officeholder name MCLENNAN COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 23488 WACO, TX 76710	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name Office sought Office held		
Date 11/01/2024	Payee name MCLEOD, LAUREL	
Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4 COMMONS ROAD COLORADO SPRINGS, CO 80904	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 566/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name MEDINA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 705 HONDO, TX 78861
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MEDINA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 705 HONDO, TX 78861
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name MEDINA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 705 HONDO, TX 78861
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 567/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name MEDINA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 705 HONDO, TX 78861
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name METROCREST DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 476 COPPELL, TX 75019-0476
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name METROCREST DEMOCRATS
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Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 476 COPPELL, TX 75019-0476
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 568/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name METROCREST DEMOCRATS
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 476 COPPELL, TX 75019-0476
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name METROCREST DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 476 COPPELL, TX 75019-0476
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name METROCREST DEMOCRATS
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Amount (\$) \$57.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 476 COPPELL, TX 75019-0476
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 569/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name MEYERLAND AREA DEMOCRATS CLUB	
6 Amount (\$) \$34.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 310061 HOUSTON, TX 77035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name MEYERLAND AREA DEMOCRATS CLUB	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 310061 HOUSTON, TX 77035	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name MICHELLE BECKLEY CAMPAIGN	
Amount (\$) \$1,691.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1845 E FRANKFORD ROAD CARROLLTON, TX 75007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 570/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name MICHELLE BECKLEY CAMPAIGN
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6 Amount (\$) \$773.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1845 E FRANKFORD ROAD CARROLLTON, TX 75007
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name MICHELLE BECKLEY CAMPAIGN
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Amount (\$) \$41.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1845 E FRANKFORD ROAD CARROLLTON, TX 75007
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name MICHELLE BECKLEY CAMPAIGN
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Amount (\$) \$104.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1845 E FRANKFORD ROAD CARROLLTON, TX 75007
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 571/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name MICHELLE BECKLEY CAMPAIGN
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6 Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1845 E FRANKFORD ROAD CARROLLTON, TX 75007
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MICHELLE BECKLEY CAMPAIGN
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1845 E FRANKFORD ROAD CARROLLTON, TX 75007
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name MICHELLE PALMER CAMPAIGN
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5823 DOLIVER DRIVE HOUSTON, TX 77057
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 572/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name MICHELLE PALMER CAMPAIGN
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6 Amount (\$) \$33.61	7 Payee address; City; State; Zip Code 5823 DOLIVER DRIVE HOUSTON, TX 77057
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MICHELLE PALMER CAMPAIGN
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Amount (\$) \$43.22	Payee address; City; State; Zip Code 5823 DOLIVER DRIVE HOUSTON, TX 77057
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MICHELLE PALMER CAMPAIGN
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Amount (\$) \$33.61	Payee address; City; State; Zip Code 5823 DOLIVER DRIVE HOUSTON, TX 77057
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 573/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name MICHELLE PALMER CAMPAIGN	
6 Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5823 DOLIVER DRIVE HOUSTON, TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name MICKEY CHANCE FOR WILLIAMSON COUNTY CONSTABLE PCT. 1	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3902 AMY CIRCLE AUSTIN, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name MID-CITIES DEMOCRATS	
Amount (\$) \$317.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 574/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name MID-CITIES DEMOCRATS
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6 Amount (\$) \$6.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name MID-CITIES DEMOCRATS
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Amount (\$) \$6.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name MID-CITIES DEMOCRATS
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Amount (\$) \$29.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 575/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name MID-CITIES DEMOCRATS
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6 Amount (\$) \$176.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name MID-CITIES DEMOCRATS
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Amount (\$) \$41.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MID-CITIES DEMOCRATS
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Amount (\$) \$1.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 576/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name MID-CITIES DEMOCRATS
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6 Amount (\$) \$16.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name MID-CITIES DEMOCRATS
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Amount (\$) \$72.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name MID-CITIES DEMOCRATS
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Amount (\$) \$153.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 577/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name MID-CITIES DEMOCRATS
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 805 SHADYCREEK CT. ARLINGTON, TX 76013
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MID-CITIES STONEWALL DEMOCRATS GPAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5745 CHELMSFORD TRAIL ARLINGTON, TX 76018
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name MID-CITIES STONEWALL DEMOCRATS GPAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5745 CHELMSFORD TRAIL ARLINGTON, TX 76018
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 578/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name MID-CITIES STONEWALL DEMOCRATS GPAC
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5745 CHELMSFORD TRAIL ARLINGTON, TX 76018
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MIDLAND TEXAS DEMOCRATIC PARTY
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Amount (\$) \$120.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1014 MIDLAND, TX 79702-1014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name MIDLAND TEXAS DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1014 MIDLAND, TX 79702-1014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 579/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name MIHAELA PLESA FOR TEXAS
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6 Amount (\$) \$10,019.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name MIHAELA PLESA FOR TEXAS
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Amount (\$) \$15,723.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name MIHAELA PLESA FOR TEXAS
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Amount (\$) \$2,063.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 580/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/12/2024	5 Payee name MIHAELA PLESA FOR TEXAS
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6 Amount (\$) \$1,152.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name MIHAELA PLESA FOR TEXAS
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Amount (\$) \$1,254.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name MIHAELA PLESA FOR TEXAS
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Amount (\$) \$1,198.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 581/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/03/2024	5 Payee name MIHAELA PLESA FOR TEXAS
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6 Amount (\$) \$87.61	7 Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/10/2024	Payee name MIHAELA PLESA FOR TEXAS
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Amount (\$) \$3,957.16	Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name MIHAELA PLESA FOR TEXAS
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Amount (\$) \$5,369.15	Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 582/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name MIHAELA PLESA FOR TEXAS	
6 Amount (\$) \$8,948.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 796311 DALLAS, TX 75248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name MIMI COFFEY STATE HOUSE REP CAMPAIGN	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4700 AIRPORT FREEWAY FT WORTH, TX 76117	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name MIMI COFFEY STATE HOUSE REP CAMPAIGN	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4700 AIRPORT FREEWAY FT WORTH, TX 76117	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 583/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name MO JENKINS CAMPAIGN
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1717 W 34TH STREET SUITE 600-263 HOUSTON, TX 77018
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name MOLLY COOK FOR TEXAS
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Amount (\$) \$5,584.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MOLLY COOK FOR TEXAS
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Amount (\$) \$3,941.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 584/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name MOLLY COOK FOR TEXAS
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6 Amount (\$) \$192.61	7 Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name MOLLY COOK FOR TEXAS
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Amount (\$) \$67.18	Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name MOLLY COOK FOR TEXAS
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Amount (\$) \$2,708.58	Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 585/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name MOLLY COOK FOR TEXAS
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6 Amount (\$) \$1,838.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name MOLLY COOK FOR TEXAS
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Amount (\$) \$6,340.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MOLLY COOK FOR TEXAS
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Amount (\$) \$8,482.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 586/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name MOLLY COOK FOR TEXAS
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6 Amount (\$) \$11,666.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2503 PARK STREET HOUSTON, TX 77006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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Amount (\$) \$1,284.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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Amount (\$) \$2,262.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 587/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$859.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY	
Amount (\$) \$417.74 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY	
Amount (\$) \$676.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 588/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$673.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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Amount (\$) \$633.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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Amount (\$) \$542.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 589/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$453.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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Amount (\$) \$528.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name MONTGOMERY COUNTY DEMOCRATIC PARTY
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Amount (\$) \$326.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 704 N THOMPSON ST #195 CONROE, TX 77301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 590/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name MORGAN KIRKPATRICK CAMPAIGN
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6 Amount (\$) \$216.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4417 77TH ST LUBBOCK, TX 79424
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MORGAN KIRKPATRICK CAMPAIGN
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Amount (\$) \$249.71 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4417 77TH ST LUBBOCK, TX 79424
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name MORGAN KIRKPATRICK CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4417 77TH ST LUBBOCK, TX 79424
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 591/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name MORGAN LAMANTIA FOR STATE SENATE	
6 Amount (\$) \$15,596.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3502 W SPUR 54 HARLINGEN, TX 78552	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name MORGAN LAMANTIA FOR STATE SENATE	
Amount (\$) \$4,674.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3502 W SPUR 54 HARLINGEN, TX 78552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name MORGAN LAMANTIA FOR STATE SENATE	
Amount (\$) \$14.71 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3502 W SPUR 54 HARLINGEN, TX 78552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 592/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name MORGAN LAMANTIA FOR STATE SENATE
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6 Amount (\$) \$14.40	7 Payee address; City; State; Zip Code 3502 W SPUR 54 HARLINGEN, TX 78552
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name MOTHERS AGAINST GREG ABBOTT PAC
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Amount (\$) \$4,455.23	Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name MOTHERS AGAINST GREG ABBOTT PAC
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Amount (\$) \$11,465.38	Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 593/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name MOTHERS AGAINST GREG ABBOTT PAC	
6 Amount (\$) \$4,779.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2024	Candidate/Officeholder name MOTHERS AGAINST GREG ABBOTT PAC	
Amount (\$) \$1,973.44 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 27881 AUSTIN, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name MOTHERS AGAINST GREG ABBOTT PAC	
Amount (\$) \$1,378.56 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 27881 AUSTIN, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 594/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name MOTHERS AGAINST GREG ABBOTT PAC	
6 Amount (\$) \$1,831.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name MOTHERS AGAINST GREG ABBOTT PAC	
Amount (\$) \$6,411.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name MOTHERS AGAINST GREG ABBOTT PAC	
Amount (\$) \$1,416.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 595/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name MOTHERS AGAINST GREG ABBOTT PAC
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6 Amount (\$) \$1,827.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name MOTHERS AGAINST GREG ABBOTT PAC
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Amount (\$) \$1,641.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name MOTHERS AGAINST GREG ABBOTT PAC
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Amount (\$) \$3,620.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 27881 AUSTIN, TX 78755
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 596/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name MUSLIM DEMOCRATIC CAUCUS OF TEXAS
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6 Amount (\$) \$72.03	7 Payee address; City; State; Zip Code 601 ENGLSIDE DR ARLINGTON, TX 76018
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name MUSLIM DEMOCRATIC CAUCUS OF TEXAS
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Amount (\$) \$384.20	Payee address; City; State; Zip Code 601 ENGLSIDE DR ARLINGTON, TX 76018
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name MUSLIM DEMOCRATIC CAUCUS OF TEXAS
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 601 ENGLSIDE DR ARLINGTON, TX 76018
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 597/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name MUSLIM DEMOCRATIC CAUCUS OF TEXAS
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6 Amount (\$) \$384.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 601 ENGLSIDE DR ARLINGTON, TX 76018
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 598/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 599/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name NACOGDOCHES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 633961 NACOGDOCHES, TX 75963
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 600/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name NAFT COPE 2 PAC
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 380101 SAN ANTONIO, TX 78268
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/28/2024	Payee name NAIR, GOPALAN
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code TREEHOUSE APT 2B 45/1 FIRST CRSS PRM RD KS 560042 BANGALORE, DC 20000
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name NATHAN M. JOHNSON CAMPAIGN
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Amount (\$) \$592.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 601/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name NATHAN M. JOHNSON CAMPAIGN
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6 Amount (\$) \$408.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name NATHAN M. JOHNSON CAMPAIGN
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Amount (\$) \$218.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NATHAN M. JOHNSON CAMPAIGN
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Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 602/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name NATHAN M. JOHNSON CAMPAIGN
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6 Amount (\$) \$782.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name NATHAN M. JOHNSON CAMPAIGN
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Amount (\$) \$151.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name NATHAN M. JOHNSON CAMPAIGN
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Amount (\$) \$8,217.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 670994 DALLAS, TX 75367-0994
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 603/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name NAVARRO COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$105.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 113 W COLLINS CORSICANA, TX 75110
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name NEALE, LUCY
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3525 ALABAMA ST SAN DIEGO, CA 92104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/14/2024	Payee name NEALE, LUCY
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Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3525 ALABAMA ST SAN DIEGO, CA 92104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 604/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name NICOLE D COLLIER CAMPAIGN FUND
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6 Amount (\$) \$432.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 24241 FORT WORTH, TX 76124
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2024	Payee name NORRIS, PATRICIA
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Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1000 MILLER AVE RED OAK, IA 51566
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2024	Payee name NORRIS, PATRICIA
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Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1000 MILLER AVE RED OAK, IA 51566
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 605/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Payee name NORRIS, PATRICIA	
6 Amount (\$) \$1.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1000 MILLER AVE RED OAK, IA 51566	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name NORTH BRAZORIA COUNTY DEMOCRATIC CLUB	
Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1107 GULFTON DR PEARLAND, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name NORTH BRAZORIA COUNTY DEMOCRATIC CLUB	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1107 GULFTON DR PEARLAND, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 606/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name NORTH BRAZORIA COUNTY DEMOCRATIC CLUB	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1107 GULFTON DR PEARLAND, TX 77581	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2024	Candidate/Officeholder name NORTH BRAZORIA COUNTY DEMOCRATIC CLUB	
Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1107 GULFTON DR PEARLAND, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name NORTH EAST BEXAR COUNTY DEMOCRATS PAC	
Amount (\$) \$1,616.89 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 700766 SAN ANTONIO, TX 78270-0766	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 607/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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6 Amount (\$) \$1,081.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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Amount (\$) \$446.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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Amount (\$) \$266.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 608/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC	
6 Amount (\$) \$96.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC	
Amount (\$) \$124.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC	
Amount (\$) \$187.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 609/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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6 Amount (\$) \$404.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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Amount (\$) \$144.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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Amount (\$) \$105.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 610/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name NORTH EAST BEXAR COUNTY DEMOCRATS PAC
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 700766 SAN ANTONIO, TX 78270-0766
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name NORTH TEXAS DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3710 RAWLINS ST STE 1420 DALLAS, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 611/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 612/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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6 Amount (\$) \$110.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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Amount (\$) \$302.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 613/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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6 Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name NORTHEAST TARRANT COUNTY DEMOCRATS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 818 COLLEYVILLE, TX 76034
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NORTHEAST TEXAS DEMOCRATIC COALITION
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 912903 SHERMAN, TX 75091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 614/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name NORTHEAST TEXAS DEMOCRATIC COALITION	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 912903 SHERMAN, TX 75091	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name NORTHEAST TEXAS DEMOCRATIC COALITION	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 912903 SHERMAN, TX 75091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name NORTHEAST TEXAS DEMOCRATIC COALITION	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 912903 SHERMAN, TX 75091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 615/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name NORTHEAST TRAVIS COUNTY DEMOCRAT	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 14905 EVENING MIST LANE PFLUGERVILLE, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name NORTHEAST TRAVIS COUNTY DEMOCRAT	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14905 EVENING MIST LANE PFLUGERVILLE, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name NORTHEAST TRAVIS COUNTY DEMOCRAT	
Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14905 EVENING MIST LANE PFLUGERVILLE, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 616/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name NORTHEAST TRAVIS COUNTY DEMOCRAT
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 14905 EVENING MIST LANE PFLUGERVILLE, TX 78660
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name NORTHEAST TRAVIS COUNTY DEMOCRAT
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14905 EVENING MIST LANE PFLUGERVILLE, TX 78660
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name NORTHERN CAMERON COUNTY DEMOCRATS
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Amount (\$) \$206.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 24336 PRESTON TRAIL HARLINGEN, TX 78550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 617/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name NORTHERN CAMERON COUNTY DEMOCRATS	
6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 24336 PRESTON TRAIL HARLINGEN, TX 78550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name NORTHERN CAMERON COUNTY DEMOCRATS	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 24336 PRESTON TRAIL HARLINGEN, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name NORTHERN CAMERON COUNTY DEMOCRATS	
Amount (\$) \$28.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 24336 PRESTON TRAIL HARLINGEN, TX 78550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 618/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name NORTHERN CAMERON COUNTY DEMOCRATS
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 24336 PRESTON TRAIL HARLINGEN, TX 78550
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name NORTHERN CAMERON COUNTY DEMOCRATS
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Amount (\$) \$28.80	Payee address; City; State; Zip Code 24336 PRESTON TRAIL HARLINGEN, TX 78550
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NORTHWEST DEMOCRATS OF BEXAR COUNTY PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 681911 SAN ANTONIO, TX 78268
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 619/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name NORTHWEST DEMOCRATS OF BEXAR COUNTY PAC	
6 Amount (\$) \$144.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 681911 SAN ANTONIO, TX 78268	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name NORTHWEST DEMOCRATS OF BEXAR COUNTY PAC	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 681911 SAN ANTONIO, TX 78268	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name NORTHWEST DEMOCRATS OF BEXAR COUNTY PAC	
Amount (\$) \$254.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 681911 SAN ANTONIO, TX 78268	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 620/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name NORTHWEST DEMOCRATS OF BEXAR COUNTY PAC
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6 Amount (\$) \$292.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 681911 SAN ANTONIO, TX 78268
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name NORTHWEST DEMOCRATS OF BEXAR COUNTY PAC
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 681911 SAN ANTONIO, TX 78268
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name NUECES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$249.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 621/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name NUECES COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$196.89 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name NUECES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$352.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name NUECES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$223.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 622/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name NUECES COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2024	Candidate/Officeholder name NUECES COUNTY DEMOCRATIC PARTY	
Amount (\$) \$69.14 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 853 CORPUS CHRISTI, TX 78415	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2024	Candidate/Officeholder name NUECES COUNTY DEMOCRATIC PARTY	
Amount (\$) \$79.71 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 853 CORPUS CHRISTI, TX 78415	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 623/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name NUECES COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name NUECES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name NUECES COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 853 CORPUS CHRISTI, TX 78415
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 624/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name OAK FOREST AREA DEMOCRATS
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6 Amount (\$) \$19.21	7 Payee address; City; State; Zip Code 6111 W 43RD ST HOUSTON, TX 77092
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name OAK FOREST AREA DEMOCRATS
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Amount (\$) \$67.23	Payee address; City; State; Zip Code 6111 W 43RD ST HOUSTON, TX 77092
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name OAK FOREST AREA DEMOCRATS
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Amount (\$) \$38.42	Payee address; City; State; Zip Code 6111 W 43RD ST HOUSTON, TX 77092
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 625/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name OAK FOREST AREA DEMOCRATS
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6 Amount (\$) \$57.63	7 Payee address; City; State; Zip Code 6111 W 43RD ST HOUSTON, TX 77092
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name OAK FOREST AREA DEMOCRATS
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Amount (\$) \$19.21	Payee address; City; State; Zip Code 6111 W 43RD ST HOUSTON, TX 77092
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name OAK FOREST AREA DEMOCRATS
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Amount (\$) \$38.42	Payee address; City; State; Zip Code 6111 W 43RD ST HOUSTON, TX 77092
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 626/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/30/2024	5 Payee name OBOYLE, JACK
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3037 ROSEDALE AVE DALLAS, TX 75205
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ONE TEXAS PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 104 BABCOCK ROAD STE 107 SAN ANTONIO, TX 78201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ORGANIZE TO WIN PAC
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Amount (\$) \$3,990.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667238 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 627/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ORGANIZE TO WIN PAC
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6 Amount (\$) \$4,457.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 667238 HOUSTON, TX 77266
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ORGANIZE TO WIN PAC
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Amount (\$) \$10,421.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 667238 HOUSTON, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2024	Payee name ORT, KELLY
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Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2115 CORBETT RD MONKTON, MD 21111
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 628/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name ORTIZ FOR TEXAS
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6 Amount (\$) \$3,232.97 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 286 CORPUS CHRISTI, TX 78403
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name ORTIZ FOR TEXAS
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Amount (\$) \$5,796.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 286 CORPUS CHRISTI, TX 78403
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name OSCAR UGARTE FOR SHERIFF
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7383 REMCON CIRCLE #222021 EL PASO, TX 79912
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 629/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name OSCAR UGARTE FOR SHERIFF
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6 Amount (\$) \$264.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7383 REMCON CIRCLE #222021 EL PASO, TX 79912
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name OSCAR UGARTE FOR SHERIFF
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Amount (\$) \$44.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7383 REMCON CIRCLE #222021 EL PASO, TX 79912
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name OSCAR UGARTE FOR SHERIFF
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7383 REMCON CIRCLE #222021 EL PASO, TX 79912
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 630/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name OSCAR UGARTE FOR SHERIFF	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7383 REMCON CIRCLE #222021 EL PASO, TX 79912	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name OSCAR UGARTE FOR SHERIFF	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7383 REMCON CIRCLE #222021 EL PASO, TX 79912	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2024	Payee name OTTO, ROBERT	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5312 LAIR DRIVE GREENSBORO, NC 27407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 631/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name OURTEXAS PAC
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6 Amount (\$) \$48.97	7 Payee address; City; State; Zip Code 5500 GREENWOOD PLAZA BLVD STE 130 GREENWOOD VILLAGE, CO 80111
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name OURTEXAS PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 5500 GREENWOOD PLAZA BLVD STE 130 GREENWOOD VILLAGE, CO 80111
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name OURTEXAS PAC
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Amount (\$) \$48.97	Payee address; City; State; Zip Code 5500 GREENWOOD PLAZA BLVD STE 130 GREENWOOD VILLAGE, CO 80111
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 632/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name OURTEXAS PAC	
6 Amount (\$) \$39.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5500 GREENWOOD PLAZA BLVD STE 130 GREENWOOD VILLAGE, CO 80111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name OURTEXAS PAC	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5500 GREENWOOD PLAZA BLVD STE 130 GREENWOOD VILLAGE, CO 80111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name PAINT TEXAS BLUE PAC	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 5674 AUSTIN, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 633/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name PAINT TEXAS BLUE PAC
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code PO BOX 5674 AUSTIN, TX 78763
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name PALO PINTO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$38.41	Payee address; City; State; Zip Code P. O. BOX 151 MINERAL WELLS, TX 76068
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name PALO PINTO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$57.62	Payee address; City; State; Zip Code P. O. BOX 151 MINERAL WELLS, TX 76068
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 634/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name PALO PINTO COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 151 MINERAL WELLS, TX 76068	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name PALO PINTO COUNTY DEMOCRATIC PARTY	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 151 MINERAL WELLS, TX 76068	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name PALO PINTO COUNTY DEMOCRATIC PARTY	
Amount (\$) \$48.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 151 MINERAL WELLS, TX 76068	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 635/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name PANHANDLE DEMOCRATS
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 7232 AMARILLO, TX 79114-7232
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PANHANDLE DEMOCRATS
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 7232 AMARILLO, TX 79114-7232
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PANOLA COUNTY DEMOCRAT CLUB
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 636/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name PANOLA COUNTY DEMOCRAT CLUB
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name PANOLA COUNTY DEMOCRAT CLUB
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name PANOLA COUNTY DEMOCRAT CLUB
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 637/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name PANOLA COUNTY DEMOCRAT CLUB
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name PANOLA COUNTY DEMOCRAT CLUB
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name PANOLA COUNTY DEMOCRAT CLUB
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 638/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name PANOLA COUNTY DEMOCRAT CLUB
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1054 CARTHAGE, TX 75633
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name PARKER COUNTY ACTIVE DEMOCRATS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name PARKER COUNTY ACTIVE DEMOCRATS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 639/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name PARKER COUNTY ACTIVE DEMOCRATS	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name PARKER COUNTY ACTIVE DEMOCRATS	
Amount (\$) \$24.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name PARKER COUNTY ACTIVE DEMOCRATS	
Amount (\$) \$120.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 640/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name PARKER COUNTY ACTIVE DEMOCRATS
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name PARKER COUNTY ACTIVE DEMOCRATS
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name PARKER COUNTY ACTIVE DEMOCRATS
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Amount (\$) \$86.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2081 WEATHERFORD, TX 76087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 641/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name PARKER COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$91.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY
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Amount (\$) \$240.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY
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Amount (\$) \$196.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 642/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name PARKER COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$391.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY	
Amount (\$) \$60.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY	
Amount (\$) \$124.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 643/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name PARKER COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY
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Amount (\$) \$315.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY
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Amount (\$) \$156.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 644/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name PARKER COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name PARKER COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 210 S LAMAR ST WEATHERFORD, TX 76086-4114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PARKER COUNTY TEXAS DEMOCRATIC WOMEN
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Amount (\$) \$76.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 463 SPRING CREEK PARKWAY WEATHERFORD, TX 76087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 645/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name PATRICK MOSES FOR TARRANT COUNTY SHERIFF	
6 Amount (\$) \$315.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 915 MANSFIELD, TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name PATRICK MOSES FOR TARRANT COUNTY SHERIFF	
Amount (\$) \$245.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 915 MANSFIELD, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name PATRICK MOSES FOR TARRANT COUNTY SHERIFF	
Amount (\$) \$120.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 915 MANSFIELD, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 646/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name PATRICK MOSES FOR TARRANT COUNTY SHERIFF
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 915 MANSFIELD, TX 76063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name PATRICK MOSES FOR TARRANT COUNTY SHERIFF
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 915 MANSFIELD, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name PATRICK MOSES FOR TARRANT COUNTY SHERIFF
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 915 MANSFIELD, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 647/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name PEARLAND DEMOCRATS CLUB
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6 Amount (\$) \$201.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PEARLAND DEMOCRATS CLUB
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name PEARLAND DEMOCRATS CLUB
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 648/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name PEARLAND DEMOCRATS CLUB
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name PEARLAND DEMOCRATS CLUB
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Amount (\$) \$153.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name PEARLAND DEMOCRATS CLUB
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Amount (\$) \$259.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 649/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name PEARLAND DEMOCRATS CLUB
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2511 FOXGLOVE DR. PEARLAND, TX 77584
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name PENA, LISA
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3857 CRESTLINE RD FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name PENA, LISA
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3857 CRESTLINE RD FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 650/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/04/2024	5 Payee name PENA, LISA
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6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3857 CRESTLINE RD FORT WORTH, TX 76107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name PENNY SHAW CAMPAIGN
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Amount (\$) \$739.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 925991 HOUSTON, TX 77292
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name PENNY SHAW CAMPAIGN
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Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 925991 HOUSTON, TX 77292
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 651/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name PENNY SHAW CAMPAIGN
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 925991 HOUSTON, TX 77292
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name PENNY SHAW CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 925991 HOUSTON, TX 77292
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name PENNY SHAW CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 925991 HOUSTON, TX 77292
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 652/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name PENNY SHAW CAMPAIGN	
6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 925991 HOUSTON, TX 77292	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name PERLA FOR TEXAS	
Amount (\$) \$307.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 420 LOMAX LANE FORT WORTH, TX 76131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name PERLA FOR TEXAS	
Amount (\$) \$388.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 420 LOMAX LANE FORT WORTH, TX 76131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 653/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name PERLA FOR TEXAS	
6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 420 LOMAX LANE FORT WORTH, TX 76131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name PERLA FOR TEXAS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 420 LOMAX LANE FORT WORTH, TX 76131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name PERLA FOR TEXAS	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 420 LOMAX LANE FORT WORTH, TX 76131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 654/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name PERLA FOR TEXAS
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 420 LOMAX LANE FORT WORTH, TX 76131
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/27/2024	Payee name PETTY, JANE
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11900 WEST OLYMPIC BLVD LOS ANGELES, CA 90064
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/04/2024	Payee name PFIESTER, R E
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Amount (\$) \$2.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2000 RIVERSIDE DRIVE LOS ANGELES, CA 90039
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 655/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name PFLUGERVILLE AREA DEMOCRATS
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6 Amount (\$) \$355.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name PFLUGERVILLE AREA DEMOCRATS
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Amount (\$) \$105.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PFLUGERVILLE AREA DEMOCRATS
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Amount (\$) \$201.67 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 656/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name PFLUGERVILLE AREA DEMOCRATS	
6 Amount (\$) \$163.71 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2024	Candidate/Officeholder name PFLUGERVILLE AREA DEMOCRATS	
Amount (\$) \$76.82 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 2655 PFLUGERVILLE, TX 78691	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name PFLUGERVILLE AREA DEMOCRATS		
Office sought P.O. BOX 2655 PFLUGERVILLE, TX 78691		
Office held		
Date 12/01/2024	Candidate/Officeholder name PFLUGERVILLE AREA DEMOCRATS	
Amount (\$) \$69.60 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 2655 PFLUGERVILLE, TX 78691	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name PFLUGERVILLE AREA DEMOCRATS		
Office sought P.O. BOX 2655 PFLUGERVILLE, TX 78691		
Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 657/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name PFLUGERVILLE AREA DEMOCRATS
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6 Amount (\$) \$523.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name PFLUGERVILLE AREA DEMOCRATS
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Amount (\$) \$202.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name PFLUGERVILLE AREA DEMOCRATS
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Amount (\$) \$100.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 658/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name PFLUGERVILLE AREA DEMOCRATS
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6 Amount (\$) \$60.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name PFLUGERVILLE AREA DEMOCRATS
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Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2655 PFLUGERVILLE, TX 78691
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name PLANNED PARENTHOOD TEXAS VOTES PAC
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 41646 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 659/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name PLANNED PARENTHOOD TEXAS VOTES PAC
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 41646 AUSTIN, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name PLANNED PARENTHOOD TEXAS VOTES PAC
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 41646 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name PLANNED PARENTHOOD TEXAS VOTES PAC
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Amount (\$) \$494.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 41646 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 660/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name PLANO AREA DEMOCRATS	
6 Amount (\$) \$78.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 251373 PLANO, TX 75025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name PLANO AREA DEMOCRATS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 251373 PLANO, TX 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name PLANO AREA DEMOCRATS	
Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 251373 PLANO, TX 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 661/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name PLANO AREA DEMOCRATS	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 251373 PLANO, TX 75025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name PLANO AREA DEMOCRATS	
Amount (\$) \$270.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 251373 PLANO, TX 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name PLANO AREA DEMOCRATS	
Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 251373 PLANO, TX 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 662/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/04/2024	5 Payee name PLANT, CYNTHIA	
6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1802 HIGHLAND DR CARROLLTON, TX 75006-7318	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name PLESA, MIHAELA	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 18904 FORTSON AVE DALLAS, TX 75252	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2024	Payee name PLESA, MIHAELA	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 18904 FORTSON AVE DALLAS, TX 75252	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 663/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Payee name PLESA, MIHAELA	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 18904 FORTSON AVE DALLAS, TX 75252	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2024	Payee name PLESA, MIHAELA	
Amount (\$) \$70.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 18904 FORTSON AVE DALLAS, TX 75252	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2024	Payee name PLUE, ROSEMARY	
Amount (\$) \$12.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 17042 EMPANADA PLACE ENCINO, CA 91436-4041	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 664/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/19/2024	5 Payee name PM, MVP
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6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1653 THE FAIRWAY SUITE 205 JENKINTOWN, PA 19046
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name POLK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1262 3626 HWY 190W LIVINGSTON, TX 77351
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name POLK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1262 3626 HWY 190W LIVINGSTON, TX 77351
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 665/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name POLK COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1262 3626 HWY 190W LIVINGSTON, TX 77351
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name POLK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1262 3626 HWY 190W LIVINGSTON, TX 77351
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name POLK COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1262 3626 HWY 190W LIVINGSTON, TX 77351
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 666/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name POWER THE VOTE - TEXAS, INC.
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 320 EASTON RD DALLAS, TX 75218
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name POWER THE VOTE - TEXAS, INC.
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 320 EASTON RD DALLAS, TX 75218
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name POWER THE VOTE - TEXAS, INC.
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 320 EASTON RD DALLAS, TX 75218
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 667/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name POWER THE VOTE - TEXAS, INC.
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 320 EASTON RD DALLAS, TX 75218
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name POWER THE VOTE - TEXAS, INC.
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 320 EASTON RD DALLAS, TX 75218
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name PRESIDIO COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1548 MARFA, TX 79843
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 668/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name PROTECT AUSTIN PAC
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6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 122 C STREET NW SUITE 360 WASHINGTON, DC 20001
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name PROTECT AUSTIN PAC
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Amount (\$) \$8,260.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 122 C STREET NW SUITE 360 WASHINGTON, DC 20001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name PROTECT AUSTIN PAC
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Amount (\$) \$2,401.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 122 C STREET NW SUITE 360 WASHINGTON, DC 20001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 669/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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6 Amount (\$) \$302.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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Amount (\$) \$60.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 670/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 671/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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6 Amount (\$) \$14.40	7 Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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Amount (\$) \$33.61	Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name RACHEL MELLO PUBLIC CAMPAIGN FUND
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Amount (\$) \$5.76	Payee address; City; State; Zip Code 2600 CHAMBERLAIN DR PLANO, TX 75023
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 672/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/20/2024	5 Payee name RAFFAELLI, PAULO
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6 Amount (\$) \$2.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 538 MUNICH STREET SAN FRANCISCO, CA 94112
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name RAHIM, SANIA
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2345 GLEN HAVEN HOUSTON, TX 77030
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name RAMACHANDRAN, SUNDER
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2850 FIELD LINE DRIVE SUGAR LAND, TX 77479
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 673/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name RAMON ROMERO, JR. FOR STATE REPRESENTATIVE
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6 Amount (\$) \$672.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 181 FORT WORTH, TX 76101
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name RAMON ROMERO, JR. FOR STATE REPRESENTATIVE
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 181 FORT WORTH, TX 76101
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/01/2024	Payee name RATTIGAN, PETER
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 COLUMBIA AVENUE PITMAN, NJ 08071
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 674/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name RAY LOPEZ CAMPAIGN	
6 Amount (\$) \$576.29 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7015 QUIET RIDGE WALK SAN ANTONIO, TX 78250	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name RAYNA FOR SBOE 11	
Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 10741 FORT WORTH, TX 76114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name RAYNA FOR SBOE 11	
Amount (\$) \$28.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 10741 FORT WORTH, TX 76114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 675/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name RAYNA FOR SBOE 11
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 10741 FORT WORTH, TX 76114
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name RAYNA FOR SBOE 11
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 10741 FORT WORTH, TX 76114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RE-ELECT ERIC FAGAN FOR FORT BEND COUNTY SHERIFF
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Amount (\$) \$984.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2304 HIGH TIDE LANE PEARLAND, TX 77584
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 676/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name REBECCA MINNICK CAMPAIGN
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6 Amount (\$) \$355.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2235 RIVER ROAD WIMBERLEY, TX 78676
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name REBECCA MINNICK CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2235 RIVER ROAD WIMBERLEY, TX 78676
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name REBECCA MINNICK CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2235 RIVER ROAD WIMBERLEY, TX 78676
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 677/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name REBECCA MINNICK CAMPAIGN
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2235 RIVER ROAD WIMBERLEY, TX 78676
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name REGINA HINOJOSA CAMPAIGN FUND
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Amount (\$) \$302.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300095 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name REGINA HINOJOSA CAMPAIGN FUND
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Amount (\$) \$3.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 300095 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 678/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name REGINA HINOJOSA CAMPAIGN FUND
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6 Amount (\$) \$14.40	7 Payee address; City; State; Zip Code PO BOX 300095 AUSTIN, TX 78703
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name REGINA HINOJOSA CAMPAIGN FUND
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Amount (\$) \$273.73	Payee address; City; State; Zip Code PO BOX 300095 AUSTIN, TX 78703
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name REGINA HINOJOSA CAMPAIGN FUND
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Amount (\$) \$48.02	Payee address; City; State; Zip Code PO BOX 300095 AUSTIN, TX 78703
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 679/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name REGINA HINOJOSA CAMPAIGN FUND	
6 Amount (\$) \$4,810.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 300095 AUSTIN, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name REPRESENT TEXAS	
Amount (\$) \$3,092.72 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 140981 DALLAS, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name REPRESENT TEXAS	
Amount (\$) \$177.66 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 140981 DALLAS, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 680/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name REPRESENT TEXAS
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6 Amount (\$) \$153.67 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 140981 DALLAS, TX 75214
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name REPRESENT TEXAS
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Amount (\$) \$52.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 140981 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name REPRESENT TEXAS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 140981 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 681/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name REPRESENT TEXAS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 140981 DALLAS, TX 75214
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name REPRESENT TEXAS
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 140981 DALLAS, TX 75214
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2024	Payee name REYNOLDS, MARJORIE AMONETT REYNOLDS
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8005 CHICAGO AVE LUBBOCK, TX 79424
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 682/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name RGV STONEWALL DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2019 N CONWAY AVE. MISSION, TX 78572
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name RGV STONEWALL DEMOCRATS
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2019 N CONWAY AVE. MISSION, TX 78572
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RHETTA BOWERS CAMPAIGN
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Amount (\$) \$703.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 683/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name RHETTA BOWERS CAMPAIGN	
6 Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name RHETTA BOWERS CAMPAIGN	
Amount (\$) \$432.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name RHETTA BOWERS CAMPAIGN	
Amount (\$) \$256.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 684/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name RHETTA BOWERS CAMPAIGN
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6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name RHETTA BOWERS CAMPAIGN
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name RHETTA BOWERS CAMPAIGN
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Amount (\$) \$542.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3526 LAKEVIEW PKWY. STE. B-211 ROWLETT, TX 75088
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 685/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name RICHARD CANTU CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11015 CATAMORE ST HOUSTON, TX 77076
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RICHARD RAYMOND CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11024 WINBURN DRIVE LAREDO, TX 78045
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name RICHARD RAYMOND CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11024 WINBURN DRIVE LAREDO, TX 78045
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 686/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name RICHARD RAYMOND CAMPAIGN
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6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11024 WINBURN DRIVE LAREDO, TX 78045
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RICHARDSON DEMOCRATS
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Amount (\$) \$201.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name RICHARDSON DEMOCRATS
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Amount (\$) \$202.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 687/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name RICHARDSON DEMOCRATS	
6 Amount (\$) \$193.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name RICHARDSON DEMOCRATS	
Amount (\$) \$189.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name RICHARDSON DEMOCRATS	
Amount (\$) \$310.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 688/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name RICHARDSON DEMOCRATS
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6 Amount (\$) \$116.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name RICHARDSON DEMOCRATS
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Amount (\$) \$750.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name RICHARDSON DEMOCRATS
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Amount (\$) \$561.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 689/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name RICHARDSON DEMOCRATS
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6 Amount (\$) \$499.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name RICHARDSON DEMOCRATS
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Amount (\$) \$43.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name RICHARDSON DEMOCRATS
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Amount (\$) \$124.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 411 W LOOKOUT DR RICHARDSON, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 690/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/23/2024	5 Payee name RICHTER, DENISE & BLAIR
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6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 148 BRIGHTWOOD PLACE SAN ANTONIO, TX 78209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RIDESHARE2VOTE
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Amount (\$) \$75,281.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name RIDESHARE2VOTE
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Amount (\$) \$69,113.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 691/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name RIDESHARE2VOTE
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6 Amount (\$) \$10,695.88	7 Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name RIDESHARE2VOTE
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Amount (\$) \$5,103.65	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name RIDESHARE2VOTE
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Amount (\$) \$3,649.32	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 692/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name RIDESHARE2VOTE
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6 Amount (\$) \$3,460.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name RIDESHARE2VOTE
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Amount (\$) \$2,359.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name RIDESHARE2VOTE
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Amount (\$) \$2,614.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 693/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name RIDESHARE2VOTE	
6 Amount (\$) \$2,891.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name RIDESHARE2VOTE	
Amount (\$) \$2,061.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name RIDESHARE2VOTE	
Amount (\$) \$834.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3323 DOTHAN LANE DALLAS, TX 75229	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 694/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name RIVER OAKS AREA DEMOCRATIC WOMEN
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6 Amount (\$) \$192.08	7 Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name RIVER OAKS AREA DEMOCRATIC WOMEN
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Amount (\$) \$888.44	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name RIVER OAKS AREA DEMOCRATIC WOMEN
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Amount (\$) \$2,881.44	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 695/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name RIVER OAKS AREA DEMOCRATIC WOMEN
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6 Amount (\$) \$1,018.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name RIVER OAKS AREA DEMOCRATIC WOMEN
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Amount (\$) \$576.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name RIVER OAKS AREA DEMOCRATIC WOMEN
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Amount (\$) \$1,176.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 696/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name RIVER OAKS AREA DEMOCRATIC WOMEN	
6 Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name RIVER OAKS AREA DEMOCRATIC WOMEN	
Amount (\$) \$480.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name ROBERT J. MCGINTY FOR CONSTABLE PRECINCT 2	
Amount (\$) \$91.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4101 W. GREEN OAKS BLVD #305 ARLINGTON, TX 76016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 697/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ROBERT J. MCGINTY FOR CONSTABLE PRECINCT 2
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4101 W. GREEN OAKS BLVD #305 ARLINGTON, TX 76016
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ROBERT J. MCGINTY FOR CONSTABLE PRECINCT 2
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4101 W. GREEN OAKS BLVD #305 ARLINGTON, TX 76016
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ROBERTSON COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 576 BREMOND, TX 76629
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 698/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name ROBERTSON COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 576 BREMOND, TX 76629
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ROBERTSON COUNTY DEMOCRATIC PARTY EXECUTIVE COMMITTEE
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 576 BREMOND, TX 76629
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 699/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$201.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$60.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 700/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$28.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$192.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$91.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 701/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$98.92	7 Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$81.62	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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Amount (\$) \$139.25	Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 702/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name ROCKWALL COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$52.82	7 Payee address; City; State; Zip Code 519 E. INTERSTATE 30 #702 ROCKWALL, TX 75087
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT
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Amount (\$) \$393.78	Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT
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Amount (\$) \$2,185.13	Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 703/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/05/2024	5 Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT
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6 Amount (\$) \$484.09	7 Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 704/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT	
Amount (\$) \$3.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT	
Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 705/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name RODERICK FRED MILES JR. CAMPAIGN ACCOUNT
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 7437 WHISTERWHEEL WAY FORT WORTH, TX 76123
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name RODNEY ELLIS CAMPAIGN
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Amount (\$) \$1,728.89	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name RODNEY ELLIS CAMPAIGN
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Amount (\$) \$48.02	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 706/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name RODNEY ELLIS CAMPAIGN
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name RODNEY ELLIS CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name RODNEY ELLIS CAMPAIGN
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 707/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name RODNEY ELLIS CAMPAIGN	
6 Amount (\$) \$5,763.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name ROLAND GUTIERREZ FOR TEXAS SENATE	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Office sought ROLAND GUTIERREZ FOR TEXAS SENATE	
Office held	Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name ROLAND GUTIERREZ FOR TEXAS SENATE	
Amount (\$) \$163.26 <input type="checkbox"/> Expenditure from corporate funds	Office sought ROLAND GUTIERREZ FOR TEXAS SENATE	
Office held	Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name ROLAND GUTIERREZ FOR TEXAS SENATE	
Amount (\$) \$163.26 <input type="checkbox"/> Expenditure from corporate funds	Office sought ROLAND GUTIERREZ FOR TEXAS SENATE	
Office held	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 708/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name ROLAND GUTIERREZ FOR TEXAS SENATE
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 15232 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name ROLAND GUTIERREZ FOR TEXAS SENATE
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15232 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name ROLAND GUTIERREZ FOR TEXAS SENATE
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 15232 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 709/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name ROLAND GUTIERREZ FOR TEXAS SENATE
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6 Amount (\$) \$8.64	7 Payee address; City; State; Zip Code P.O. BOX 15232 SAN ANTONIO, TX 78212
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ROLAND GUTIERREZ FOR TEXAS SENATE
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Amount (\$) \$2,526.09	Payee address; City; State; Zip Code P.O. BOX 15232 SAN ANTONIO, TX 78212
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ROLAND GUTIERREZ FOR TEXAS SENATE
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Amount (\$) \$15,622.52	Payee address; City; State; Zip Code P.O. BOX 15232 SAN ANTONIO, TX 78212
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 710/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name RON REYNOLDS CAMPAIGN
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6 Amount (\$) \$960.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6140 HWY. 6 SOUTH #233 MISSOURI CITY, TX 77459
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name RON REYNOLDS CAMPAIGN
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Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6140 HWY. 6 SOUTH #233 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name RON REYNOLDS CAMPAIGN
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6140 HWY. 6 SOUTH #233 MISSOURI CITY, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 711/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name RON REYNOLDS CAMPAIGN	
6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6140 HWY. 6 SOUTH #233 MISSOURI CITY, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name RON REYNOLDS CAMPAIGN	
Amount (\$) \$249.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6140 HWY. 6 SOUTH #233 MISSOURI CITY, TX 77459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name ROUND ROCK DEMOCRATS CLUB	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1706 LIME ROCK DRIVE ROUND ROCK, TX 78681	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 712/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name ROYCE WEST CAMPAIGN COMMITTEE	
6 Amount (\$) \$1,080.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 320 S R.L. THORNTON FWY SUITE 220 DALLAS, TX 75203-1804	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name ROYCE WEST CAMPAIGN COMMITTEE	
Amount (\$) \$485.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 320 S R.L. THORNTON FWY SUITE 220 DALLAS, TX 75203-1804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name ROYCE WEST CAMPAIGN COMMITTEE	
Amount (\$) \$100.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 320 S R.L. THORNTON FWY SUITE 220 DALLAS, TX 75203-1804	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 713/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name ROYCE WEST CAMPAIGN COMMITTEE
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6 Amount (\$) \$1,440.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 320 S R.L. THORNTON FWY SUITE 220 DALLAS, TX 75203-1804
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name ROYCE WEST CAMPAIGN COMMITTEE
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Amount (\$) \$2,881.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 320 S R.L. THORNTON FWY SUITE 220 DALLAS, TX 75203-1804
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name RUN SISTER RUN POLITICAL ACTION COMMITTEE
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 66470 HOUSTON, TX 77266
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 714/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name RUN SISTER RUN POLITICAL ACTION COMMITTEE	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 66470 HOUSTON, TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name RUN SISTER RUN POLITICAL ACTION COMMITTEE	
Amount (\$) \$912.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 66470 HOUSTON, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name RUN SISTER RUN POLITICAL ACTION COMMITTEE	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 66470 HOUSTON, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 715/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name RUN SISTER RUN POLITICAL ACTION COMMITTEE	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 66470 HOUSTON, TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name SAENZ, SIGIFREDO	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1223 BLUE QUAIL RD NE ALBUQUERQUE, NM 87112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2024	Payee name SALAS, ROSE	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7219 BORDACE CT SPRING, TX 77379	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 716/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name SALLY DUVAL FOR TEXAS
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6 Amount (\$) \$77.01	7 Payee address; City; State; Zip Code 13300 PAISANO TRAIL AUSTIN, TX 78737
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name SALLY DUVAL FOR TEXAS
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Amount (\$) \$115.25	Payee address; City; State; Zip Code 13300 PAISANO TRAIL AUSTIN, TX 78737
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SALLY DUVAL FOR TEXAS
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 13300 PAISANO TRAIL AUSTIN, TX 78737
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 717/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name SALUTE, SA LDRS FOR UNIV OF TX EXCLLNC	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2326 WEST MAGNOLIA AVENUE SAN ANTONIO, TX 78201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name SALUTE, SA LDRS FOR UNIV OF TX EXCLLNC	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2326 WEST MAGNOLIA AVENUE SAN ANTONIO, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2024	Payee name SAMPSON, ELIZABETH	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1438 JONES RUN RD. LUMBERPORT, WV 26386	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 718/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name SAN JACINTO COUNTY DEMOCRATS	
6 Amount (\$) \$124.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 415 COLDSRING, TX 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2024	Candidate/Officeholder name SAN JACINTO COUNTY DEMOCRATS	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Office sought P. O. BOX 415 COLDSRING, TX 77331	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name SAN JACINTO COUNTY DEMOCRATS		
Date 11/24/2024	Office sought P. O. BOX 415 COLDSRING, TX 77331	
Amount (\$) \$76.83 <input type="checkbox"/> Expenditure from corporate funds	Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Candidate/Officeholder name SAN JACINTO COUNTY DEMOCRATS		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 719/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name SAN JACINTO COUNTY DEMOCRATS
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 415 COLDSRING, TX 77331
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name SAN JACINTO COUNTY DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 415 COLDSRING, TX 77331
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name SAN JACINTO COUNTY DEMOCRATS
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Amount (\$) \$76.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 415 COLDSRING, TX 77331
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 720/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name SAN PATRICIO UNITED DEMOCRATS	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 823 PORTLAND, TX 78374	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name SAN PATRICIO UNITED DEMOCRATS	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 823 PORTLAND, TX 78374	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name SAN PATRICIO UNITED DEMOCRATS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 823 PORTLAND, TX 78374	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 721/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Payee name SANDLIN, RYAN	
6 Amount (\$) \$20.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10127 BLANCHARD PARK LN CYPRESS, TX 77433	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name SANDRA LEE CAMPAIGN	
Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 624 WINTERWOOD DR KENNEDALE, TX 76060-2864	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name SANDRA LEE CAMPAIGN	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 624 WINTERWOOD DR KENNEDALE, TX 76060-2864	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 722/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name SARAH ECKHARDT CAMPAIGN
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6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 301586 AUSTIN, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name SARAH ECKHARDT CAMPAIGN
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 301586 AUSTIN, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name SARMENT, MAUREEN
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Amount (\$) \$3.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2435 UNION STREET #203 SF, CA 94123
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 723/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name SCOTT WHITE FOR TEXAS HOUSE DISTRICT 98
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6 Amount (\$) \$1,776.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2861 PLACID CIRCLE GRAPEVINE, TX 76051
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name SCOTT WHITE FOR TEXAS HOUSE DISTRICT 98
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Amount (\$) \$825.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2861 PLACID CIRCLE GRAPEVINE, TX 76051
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name SCOTT WHITE FOR TEXAS HOUSE DISTRICT 98
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2861 PLACID CIRCLE GRAPEVINE, TX 76051
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 724/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name SCOTT WHITE FOR TEXAS HOUSE DISTRICT 98
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6 Amount (\$) \$48.97	7 Payee address; City; State; Zip Code 2861 PLACID CIRCLE GRAPEVINE, TX 76051
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SCOTT WHITE FOR TEXAS HOUSE DISTRICT 98
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Amount (\$) \$24.97	Payee address; City; State; Zip Code 2861 PLACID CIRCLE GRAPEVINE, TX 76051
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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Amount (\$) \$15,841.46	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 725/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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6 Amount (\$) \$17,038.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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Amount (\$) \$2,572.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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Amount (\$) \$7,396.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 726/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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6 Amount (\$) \$254.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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Amount (\$) \$2,020.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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Amount (\$) \$647.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 727/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY	
6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY	
Amount (\$) \$15,987.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY	
Amount (\$) \$19,488.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 728/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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6 Amount (\$) \$1,515.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name SEAN TEARE FOR HARRIS COUNTY DISTRICT ATTORNEY
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Amount (\$) \$625.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7711 HIGHMEADOW DR. HOUSTON, TX 77063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SECULAR DEMOCRATS OF TEXAS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1413 CAMBRIDGE LANE DENTON, TX 76209
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 729/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name SECULAR DEMOCRATS OF TEXAS	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1413 CAMBRIDGE LANE DENTON, TX 76209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name SECULAR DEMOCRATS OF TEXAS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1413 CAMBRIDGE LANE DENTON, TX 76209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name SECULAR DEMOCRATS OF TEXAS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1413 CAMBRIDGE LANE DENTON, TX 76209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 730/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name SENATE DISTRICT 16 PAC	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 17201 HIDDEN GLEN DRIVE DALLAS, TX 75248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2024	Candidate/Officeholder name Payee name SENATOR HINOJOSA CAMPAIGN	
Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 1508 S. LONE STAR WAY SUITE 5B EDINBURG, TX 78539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/20/2024	Candidate/Officeholder name Payee name SHATTUCK, LOLA	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code 607 TOPAZ AVENUE SEGUIN, TX 78155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 731/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name SHELBY COUNTY TEXAS DEMOCRATIC PARTY
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6 Amount (\$) \$2.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1826 COUNTY ROAD 2603 SHELBYVILLE, TX 75973
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SHERYL COLE CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41 AUSTIN, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name SHERYL COLE CAMPAIGN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41 AUSTIN, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 732/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name SHERYL COLE CAMPAIGN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41 AUSTIN, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name SHOOK, LAURIE
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 223 JASON CIRCLE MURPHY, TX 75094
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$549.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 733/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name SMITH COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$99.88	7 Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$355.37	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 734/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name SMITH COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$130.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$169.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 735/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name SMITH COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$345.77 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name SMITH COUNTY DEMOCRATIC PARTY
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Amount (\$) \$222.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3835 PUTTING LANE TYLER, TX 75709
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 736/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/01/2024	5 Payee name SMITH, LUCILLE	
6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1724 HOPKINS AVE NORWOOD, OH 45212	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name SMITH-GATLIN, LINDA	
Amount (\$) \$5,024.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13200 PACIFIC PROMENADE #206 PPLAYA VISTAA, CA 90094	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name SOUTH BRAZORIA COUNTY DEMOCRATS	
Amount (\$) \$52.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 737/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 738/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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6 Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 739/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name SOUTH BRAZORIA COUNTY DEMOCRATS
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Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 206 CARLTON RD FREEPORT, TX 77541
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SOUTHEAST DEMOCRATS NETWORK
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 RUTH ST. HOUSTON, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 740/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name SOUTHEAST DEMOCRATS NETWORK	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2801 RUTH ST. HOUSTON, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name SOUTHWEST DEMOCRATS	
Amount (\$) \$297.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name SOUTHWEST DEMOCRATS	
Amount (\$) \$225.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 741/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name SOUTHWEST DEMOCRATS
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SOUTHWEST DEMOCRATS
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Amount (\$) \$76.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name SOUTHWEST DEMOCRATS
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Amount (\$) \$211.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 742/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name SOUTHWEST DEMOCRATS	
6 Amount (\$) \$196.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name SOUTHWEST DEMOCRATS	
Amount (\$) \$33.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name SOUTHWEST DEMOCRATS	
Amount (\$) \$57.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 743/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name SOUTHWEST DEMOCRATS	
6 Amount (\$) \$235.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name SOUTHWEST DEMOCRATS	
Amount (\$) \$153.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name SOUTHWEST DEMOCRATS	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2053 BELLAIRE, TX 77402-2053	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 744/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/27/2024	5 Payee name SPAIN, DIANA
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6 Amount (\$) \$2.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5410 AVENUE F AUSTIN, TX 78751
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SPRING BRANCH DEMOCRATS
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Amount (\$) \$57.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name SPRING BRANCH DEMOCRATS
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Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 745/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name SPRING BRANCH DEMOCRATS
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name SPRING BRANCH DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name SPRING BRANCH DEMOCRATS
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 746/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name SPRING BRANCH DEMOCRATS	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name SPRING BRANCH DEMOCRATS	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name SPRING BRANCH DEMOCRATS	
Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 747/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name SPRING BRANCH DEMOCRATS	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 550161 HOUSTON, TX 77255-0161	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name STACEY SWANN CAMPAIGN	
Amount (\$) \$1,094.97 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 1023 LAMPASAS, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name STACEY SWANN CAMPAIGN	
Amount (\$) \$336.17 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 1023 LAMPASAS, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 748/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name STACEY SWANN CAMPAIGN	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1023 LAMPASAS, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name STATE SENATOR JOSE MENENDEZ	
Amount (\$) \$2,497.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 100833 SAN ANTONIO, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name STATE TEJANO DEMOCRATS	
Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 THERESA AVE AUSTIN, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 749/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name STEPHANIE DRAPER FOR TEXAS STATE SENATE DISTRICT 12 CAMPAIGN
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6 Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 16905 PINERY WAY JUSTIN, TX 76247
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name STEPHANIE DRAPER FOR TEXAS STATE SENATE DISTRICT 12 CAMPAIGN
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Amount (\$) \$40.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 16905 PINERY WAY JUSTIN, TX 76247
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name STEPHANIE DRAPER FOR TEXAS STATE SENATE DISTRICT 12 CAMPAIGN
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 16905 PINERY WAY JUSTIN, TX 76247
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 750/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name STEPHANIE DRAPER FOR TEXAS STATE SENATE DISTRICT 12 CAMPAIGN
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 16905 PINERY WAY JUSTIN, TX 76247
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name STEPHANIE MORALES CAMPAIGN
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Amount (\$) \$865.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name STEPHANIE MORALES CAMPAIGN
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Amount (\$) \$111.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 751/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name STEPHANIE MORALES CAMPAIGN
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6 Amount (\$) \$4.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name STEPHANIE MORALES CAMPAIGN
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Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name STEPHANIE MORALES CAMPAIGN
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Amount (\$) \$2.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 752/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name STEPHANIE MORALES CAMPAIGN
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6 Amount (\$) \$6.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name STEPHANIE MORALES CAMPAIGN
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Amount (\$) \$8.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name STEPHANIE MORALES CAMPAIGN
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Amount (\$) \$1.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1919 SHADOW BEND DR HOUSTON, TX 77043
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 753/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/26/2024	5 Payee name STEWARD, SHEILA	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3864 THACKARY DRIVE POWDER SPRINGS, GA 30127	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name STONEWALL DEMOCRATS OF AUSTIN	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 40898 AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name STONEWALL DEMOCRATS OF AUSTIN	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 40898 AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 754/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name STONEWALL DEMOCRATS OF DALLAS
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 192305 DALLAS, TX 75219
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name STONEWALL DEMOCRATS OF DALLAS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 192305 DALLAS, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name STONEWALL DEMOCRATS OF DALLAS
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Amount (\$) \$153.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 192305 DALLAS, TX 75219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 755/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name STONEWALL DEMOCRATS OF DALLAS	
6 Amount (\$) \$388.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 192305 DALLAS, TX 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name STONEWALL DEMOCRATS OF DALLAS	
Amount (\$) \$57.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 192305 DALLAS, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name STONEWALL DEMOCRATS OF DALLAS	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 192305 DALLAS, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 756/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name STONEWALL DEMOCRATS OF DENTON COUNTY
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1114 FRAME ST APT 3 DENTON, TX 76209
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 757/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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Amount (\$) \$115.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 758/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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6 Amount (\$) \$124.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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Amount (\$) \$43.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name STONEWALL DEMOCRATS OF SAN ANTONIO
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. BOX 12814 SAN ANTONIO, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 759/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/18/2024	5 Payee name STREET, AUSTIN
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6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3964 GOODFELLOW DR DALLAS, TX 75229
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name STRUWE, CHRISTIAN
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Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 926 WEST UNIVERSITY AVE GEORGETOWN, TX 78626
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SUN CITY DEMOCRATS CLUB
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Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 760/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name SUN CITY DEMOCRATS CLUB
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6 Amount (\$) \$65.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name SUN CITY DEMOCRATS CLUB
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Amount (\$) \$96.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name SUN CITY DEMOCRATS CLUB
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 761/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name SUN CITY DEMOCRATS CLUB	
6 Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name SUN CITY DEMOCRATS CLUB	
Amount (\$) \$67.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name SUN CITY DEMOCRATS CLUB	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 762/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name SUN CITY DEMOCRATS CLUB
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6 Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name SUN CITY DEMOCRATS CLUB
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1530 SUN CITY BLVD SUITE 120 PMB 432 GEORGETOWN, TX 78633
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name SUSAN KORBEL 4CC3
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Amount (\$) \$307.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1931 NW MILITARY HWY. SUITE 250 SAN ANTONIO, TX 78213
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 763/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name SUSAN KORBEL 4CC3	
6 Amount (\$) \$437.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1931 NW MILITARY HWY. SUITE 250 SAN ANTONIO, TX 78213	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name SUSAN KORBEL 4CC3	
Amount (\$) \$105.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1931 NW MILITARY HWY. SUITE 250 SAN ANTONIO, TX 78213	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name SUSAN KORBEL 4CC3	
Amount (\$) \$27.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1931 NW MILITARY HWY. SUITE 250 SAN ANTONIO, TX 78213	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 764/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TARAL PATEL CAMPAIGN
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6 Amount (\$) \$28.81	7 Payee address; City; State; Zip Code PO BOX 2653 SUGAR LAND, TX 77487
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TARAL PATEL CAMPAIGN
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Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 2653 SUGAR LAND, TX 77487
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TARAL PATEL CAMPAIGN
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Amount (\$) \$9.60	Payee address; City; State; Zip Code PO BOX 2653 SUGAR LAND, TX 77487
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 765/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name TARRANT COUNTY DEMOCRATIC PARTY PRECINCT 3172
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1016 REED ST HURST, TX 76053
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$3,966.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$5,126.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 766/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name TARRANT COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$3,595.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$1,018.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$1,187.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 767/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name TARRANT COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$3,407.71 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$6,552.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$1,691.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 768/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name TARRANT COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$1,966.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$910.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name TARRANT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$338.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 685 JOHN B SIAS MEMORIAL PKWY SUITE 400 FORT WORTH, TX 76134
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 769/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name TARRANT COUNTY STONEWALL DEMOCRATS	
6 Amount (\$) \$11.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name TARRANT COUNTY STONEWALL DEMOCRATS	
Amount (\$) \$42.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name TARRANT COUNTY STONEWALL DEMOCRATS	
Amount (\$) \$46.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 770/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TARRANT COUNTY STONEWALL DEMOCRATS
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6 Amount (\$) \$11.52	7 Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TARRANT COUNTY STONEWALL DEMOCRATS
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Amount (\$) \$23.04	Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TARRANT COUNTY STONEWALL DEMOCRATS
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Amount (\$) \$76.81	Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 771/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name TARRANT COUNTY STONEWALL DEMOCRATS
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6 Amount (\$) \$11.52	7 Payee address; City; State; Zip Code 2608 MUSEUM WAY #3419 FORT WORTH, TX 76107
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TARRANT COUNTY YOUNG DEMOCRATS
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Amount (\$) \$1,032.49	Payee address; City; State; Zip Code 1523 CREEK BANK LN ARLINGTON, TX 76014
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TAYLOR COUNTY DEMOCRATIC PARTY
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Amount (\$) \$168.06	Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 772/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$129.66 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/10/2024	Candidate/Officeholder name TAYLOR COUNTY DEMOCRATIC PARTY	
Amount (\$) \$124.86 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 3595 ABILENE, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2024	Candidate/Officeholder name TAYLOR COUNTY DEMOCRATIC PARTY	
Amount (\$) \$62.42 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 3595 ABILENE, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 773/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$105.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 774/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
Amount (\$) \$182.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name TAYLOR COUNTY DEMOCRATIC PARTY	
Amount (\$) \$129.65 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 3595 ABILENE, TX 79604	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 775/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TAYLOR FOR COMMISSIONER
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 110 S COMMERCE ST LOCKHART, TX 78644
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TCDWC MEMBERSHIP COMMITTEE
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Amount (\$) \$441.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TCDWC MEMBERSHIP COMMITTEE
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Amount (\$) \$144.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 776/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TCDWC MEMBERSHIP COMMITTEE
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TCDWC MEMBERSHIP COMMITTEE
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TCDWC MEMBERSHIP COMMITTEE
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Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 777/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name TCDWC MEMBERSHIP COMMITTEE
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6 Amount (\$) \$144.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name TCDWC MEMBERSHIP COMMITTEE
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5405 STONELAKE DRIVE HALTOM CITY, TX 76137
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TDW OF ELLIS COUNTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 690 BECKY LANE WAXAHACHIE, TX 75165
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 778/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TDW OF ELLIS COUNTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 690 BECKY LANE WAXAHACHIE, TX 75165
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TDW OF ELLIS COUNTY
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Amount (\$) \$144.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 690 BECKY LANE WAXAHACHIE, TX 75165
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TDW OF ELLIS COUNTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 690 BECKY LANE WAXAHACHIE, TX 75165
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 779/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name TDW OF ELLIS COUNTY	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 690 BECKY LANE WAXAHACHIE, TX 75165	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name TDW OF ELLIS COUNTY	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 690 BECKY LANE WAXAHACHIE, TX 75165	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name TENESHIA HUDSPETH CAMPAIGN	
Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 780/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TENESHIA HUDSPETH CAMPAIGN
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TENESHIA HUDSPETH CAMPAIGN
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13527 N TRACEWOOD BEND HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2024	Payee name TERAN, LINDA
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Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1507 ZAMORA DR BROWNSVILLE, TX 78526
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 781/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name TERRIS GOODWIN	
6 Amount (\$) \$139.27 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name TERRIS GOODWIN	
Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name TERRIS GOODWIN	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 782/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TERRIS GOODWIN
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6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TERRIS GOODWIN
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TERRIS GOODWIN
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 783/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name TERRIS GOODWIN
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 1500 N 5TH ST TEMPLE, TX 76501
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TERRY HENDERSON CAMPAIGN
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Amount (\$) \$96.05	Payee address; City; State; Zip Code 3621 DALRAIDA DRIVE CORPUS CHRISTI, TX 78411
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TERRY HENDERSON CAMPAIGN
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Amount (\$) \$96.05	Payee address; City; State; Zip Code 3621 DALRAIDA DRIVE CORPUS CHRISTI, TX 78411
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 784/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TERRY MEZA CAMPAIGN
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 155076 IRVING, TX 75015
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TERRY MEZA CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 155076 IRVING, TX 75015
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TERRY MEZA CAMPAIGN
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 155076 IRVING, TX 75015
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 785/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name TERRY MEZA CAMPAIGN
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6 Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 155076 IRVING, TX 75015
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TERRY MEZA CAMPAIGN
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Amount (\$) \$628.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 155076 IRVING, TX 75015
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TERRY SHAMSIE CAMPAIGN
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Amount (\$) \$672.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4002 CASTLE VALLEY CORPUS CHRISTI, TX 78410
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 786/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/28/2024	5 Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)
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6 Amount (\$) \$28.81	7 Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/11/2024	Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/14/2024	Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 787/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/21/2024	5 Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/25/2024	Candidate/Officeholder name TEXAS BLACK DEMOCRATS PAC (TBD PAC)	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1034 SAULNIER STREET HOUSTON, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/09/2024	Candidate/Officeholder name TEXAS BLACK DEMOCRATS PAC (TBD PAC)	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1034 SAULNIER STREET HOUSTON, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 788/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/16/2024	5 Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/23/2024	Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2024	Payee name TEXAS BLACK DEMOCRATS PAC (TBD PAC)
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1034 SAULNIER STREET HOUSTON, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 789/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TEXAS BLUE ACTION DEMOCRATS
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6 Amount (\$) \$34,452.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TEXAS BLUE ACTION DEMOCRATS
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Amount (\$) \$20,558.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS BLUE ACTION DEMOCRATS
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Amount (\$) \$3,933.16 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 790/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TEXAS BLUE ACTION DEMOCRATS
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6 Amount (\$) \$1,058.89 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TEXAS BLUE ACTION DEMOCRATS
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Amount (\$) \$864.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS BLUE ACTION DEMOCRATS
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Amount (\$) \$477.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 791/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS BLUE ACTION DEMOCRATS
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6 Amount (\$) \$2,658.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS BLUE ACTION DEMOCRATS
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Amount (\$) \$741.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS BLUE ACTION DEMOCRATS
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Amount (\$) \$768.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 792/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name TEXAS BLUE ACTION DEMOCRATS	
6 Amount (\$) \$460.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41424 AUSTIN, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/31/2024	Candidate/Officeholder name TEXAS BLUE ACTION DEMOCRATS	
Amount (\$) \$92.91 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 41424 AUSTIN, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/10/2024	Candidate/Officeholder name TEXAS BLUEBONNET PAC	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 59 LAMPASAS, TX 76550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 793/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS BLUEBONNET PAC
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS COALITION OF BLACK DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14134 ARTHUR STREET ORE CITY, TX 75683
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS COALITION OF BLACK DEMOCRATS
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14134 ARTHUR STREET ORE CITY, TX 75683
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 794/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name TEXAS COLLEGE DEMOCRATS	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 614 S 1ST ST APT 306 AUSTIN, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name TEXAS COLLEGE DEMOCRATS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 614 S 1ST ST APT 306 AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name TEXAS COLLEGE DEMOCRATS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 614 S 1ST ST APT 306 AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 795/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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6 Amount (\$) \$5,977.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$19,361.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$94.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
- The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 796/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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6 Amount (\$) \$170.93	7 Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$49.67	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$183.43	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 797/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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6 Amount (\$) \$72.02	7 Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$125.81	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$962.90	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 798/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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6 Amount (\$) \$146.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name TEXAS DEMOCRATIC PARTY - STATE ACCOUNT
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Amount (\$) \$81.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15707 AUSTIN, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS DEMOCRATIC VETERANS
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Amount (\$) \$277.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2942 2300 SCENIC DR. GEORGETOWN, TX 78628
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 799/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TEXAS DEMOCRATIC VETERANS
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6 Amount (\$) \$143.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2942 2300 SCENIC DR. GEORGETOWN, TX 78628
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS DEMOCRATIC VETERANS
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Amount (\$) \$30.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2942 2300 SCENIC DR. GEORGETOWN, TX 78628
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS DEMOCRATIC VETERANS
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Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2942 2300 SCENIC DR. GEORGETOWN, TX 78628
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 800/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name TEXAS DEMOCRATIC VETERANS	
6 Amount (\$) \$46.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2942 2300 SCENIC DR. GEORGETOWN, TX 78628	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name TEXAS DEMOCRATIC VETERANS	
Amount (\$) \$30.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2942 2300 SCENIC DR. GEORGETOWN, TX 78628	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name TEXAS DEMOCRATIC WOMEN OF CENTRAL TEXAS - PAC	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2234 WACO, TX 76703-2234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 801/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF CENTRAL TEXAS - PAC
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 2234 WACO, TX 76703-2234
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS DEMOCRATIC WOMEN OF CENTRAL TEXAS - PAC
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2234 WACO, TX 76703-2234
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TEXAS DEMOCRATIC WOMEN OF CENTRAL TEXAS - PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 2234 WACO, TX 76703-2234
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 802/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF FORT BEND COUNTY
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6 Amount (\$) \$422.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1710 CORONA DEL MAR DRIVE MISSOURI CITY, TX 77459-4578
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS DEMOCRATIC WOMEN OF FORT BEND COUNTY
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Amount (\$) \$403.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1710 CORONA DEL MAR DRIVE MISSOURI CITY, TX 77459-4578
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS DEMOCRATIC WOMEN OF FORT BEND COUNTY
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Amount (\$) \$28.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1710 CORONA DEL MAR DRIVE MISSOURI CITY, TX 77459-4578
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 803/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF GALVESTON COUNTY
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS DEMOCRATIC WOMEN OF HARRIS COUNTY METRO AREA
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2429 BISSONNET NO. 428 HOUSTON, TX 77005
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS DEMOCRATIC WOMEN OF HOOD COUNTY
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Amount (\$) \$49.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1682 GRANBURY, TX 76048
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 804/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF HOOD COUNTY
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6 Amount (\$) \$174.79	7 Payee address; City; State; Zip Code P.O. BOX 1682 GRANBURY, TX 76048
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS DEMOCRATIC WOMEN OF HOOD COUNTY
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Amount (\$) \$24.97	Payee address; City; State; Zip Code P.O. BOX 1682 GRANBURY, TX 76048
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS DEMOCRATIC WOMEN OF HOOD COUNTY
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Amount (\$) \$128.69	Payee address; City; State; Zip Code P.O. BOX 1682 GRANBURY, TX 76048
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 805/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF HOOD COUNTY	
6 Amount (\$) \$149.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1682 GRANBURY, TX 76048	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2024	Candidate/Officeholder name Payee name TEXAS DEMOCRATIC WOMEN OF HOOD COUNTY	
Amount (\$) \$74.91 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code P.O. BOX 1682 GRANBURY, TX 76048	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name Payee name TEXAS DEMOCRATIC WOMEN OF RURAL NORTH TEXAS	
Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code PO BOX 695 DECATUR, TX 76234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 806/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF THE BRAZOS VALLEY
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6 Amount (\$) \$524.16 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO 3232 BRYAN, TX 77805
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE BRAZOS VALLEY
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Amount (\$) \$109.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO 3232 BRYAN, TX 77805
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE BRAZOS VALLEY
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Amount (\$) \$549.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO 3232 BRYAN, TX 77805
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 807/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF THE BRAZOS VALLEY
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6 Amount (\$) \$99.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO 3232 BRYAN, TX 77805
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 808/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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Amount (\$) \$230.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 809/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TEXAS DEMOCRATIC WOMEN OF THE SOUTH PLAINS
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 6372 LUBBOCK, TX 79493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 810/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TEXAS DEMOCRATIC WOMEN PAC
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6 Amount (\$) \$17.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC
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Amount (\$) \$11.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC
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Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 811/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TEXAS DEMOCRATIC WOMEN PAC
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6 Amount (\$) \$216.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC
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Amount (\$) \$513.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC
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Amount (\$) \$12.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 812/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS DEMOCRATIC WOMEN PAC
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6 Amount (\$) \$72.02	7 Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC
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Amount (\$) \$451.41	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC
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Amount (\$) \$465.83	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 813/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name TEXAS DEMOCRATIC WOMEN PAC	
6 Amount (\$) \$289.58 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name TEXAS DEMOCRATIC WOMEN PAC	
Amount (\$) \$139.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 NEWPORT BLVD LEAGUE CITY, TX 77573	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 814/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC
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Amount (\$) \$4.80	Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 815/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC
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Amount (\$) \$4.80	Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TEXAS ENVIRONMENTAL DEMOCRATS PAC
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Amount (\$) \$9.60	Payee address; City; State; Zip Code 2019 N CONWAY AVE MISSION, TX 78572
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 816/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TEXAS FRIENDS OF TREY MARTINEZ FISCHER
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6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 104 BABCOCK RD SUITE 107 SAN ANTONIO, TX 78201
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TEXAS FRIENDS OF TREY MARTINEZ FISCHER
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Amount (\$) \$976.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 104 BABCOCK RD SUITE 107 SAN ANTONIO, TX 78201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS FRIENDS OF TREY MARTINEZ FISCHER
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Amount (\$) \$976.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 104 BABCOCK RD SUITE 107 SAN ANTONIO, TX 78201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 817/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name TEXAS FRIENDS OF TREY MARTINEZ FISCHER
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6 Amount (\$) \$19,690.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 104 BABCOCK RD SUITE 107 SAN ANTONIO, TX 78201
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS GULF COAST AFL-CIO WORKING PEOPLE PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2506 SUTHERLAND ST HOUSTON TX HOUSTON, TX 77023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS GULF COAST AFL-CIO WORKING PEOPLE PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2506 SUTHERLAND ST HOUSTON TX HOUSTON, TX 77023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 818/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TEXAS HILL COUNTRY DEMOCRATS
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 24017 HAYNIE FLAT ROAD SPICEWOOD, TX 78669
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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Amount (\$) \$6,052.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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Amount (\$) \$2,807.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 819/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/14/2024	5 Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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6 Amount (\$) \$763.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/21/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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Amount (\$) \$217.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/28/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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Amount (\$) \$4,355.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 820/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/05/2024	5 Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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6 Amount (\$) \$517.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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Amount (\$) \$290.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/19/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE
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Amount (\$) \$419.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 821/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/26/2024	5 Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	
6 Amount (\$) \$337.56 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name TEXAS HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	
Amount (\$) \$652.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 314 EAST HIGHLAND MALL BLVD SUITE 104 AUSTIN, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name TEXAS JUSTICE DEMOCRATS PAC	
Amount (\$) \$115.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5907 LINDENSHIRE LANE DALLAS, TX 75230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 822/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TEXAS JUSTICE DEMOCRATS PAC
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6 Amount (\$) \$482.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5907 LINDENSHIRE LANE DALLAS, TX 75230
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TEXAS LAW ENFORCEMENT OFFICERS SUPPORT FUND
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 135 PASEO DEL PRADO SUITE 47 EDINBURG, TX 78539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS LEGISLATIVE PROGRESSIVE CAUCUS
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Amount (\$) \$2,233.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 838 GREEN COVE LANE DALLAS, TX 75232
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 823/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TEXAS LEGISLATIVE PROGRESSIVE CAUCUS
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6 Amount (\$) \$585.89 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 838 GREEN COVE LANE DALLAS, TX 75232
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS LEGISLATIVE PROGRESSIVE CAUCUS
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 838 GREEN COVE LANE DALLAS, TX 75232
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS LEGISLATIVE PROGRESSIVE CAUCUS
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 838 GREEN COVE LANE DALLAS, TX 75232
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 824/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TEXAS MAJORITY PAC
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6 Amount (\$) \$6,164.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TEXAS MAJORITY PAC
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Amount (\$) \$23,136.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS MAJORITY PAC
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Amount (\$) \$4,364.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 825/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TEXAS MAJORITY PAC
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6 Amount (\$) \$1,753.98	7 Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TEXAS MAJORITY PAC
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Amount (\$) \$375.93	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS MAJORITY PAC
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Amount (\$) \$344.26	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 826/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/08/2024	5 Payee name TEXAS MAJORITY PAC	
6 Amount (\$) \$483.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name TEXAS MAJORITY PAC	
Amount (\$) \$300.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name TEXAS MAJORITY PAC	
Amount (\$) \$55.20 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 827/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name TEXAS MAJORITY PAC
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6 Amount (\$) \$159.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name TEXAS MAJORITY PAC
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Amount (\$) \$154.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TEXAS PROGRESSIVE CAUCUS
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Amount (\$) \$112.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 828/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name TEXAS PROGRESSIVE CAUCUS
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6 Amount (\$) \$2,788.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS PROGRESSIVE CAUCUS
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Amount (\$) \$109.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS PROGRESSIVE CAUCUS
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Amount (\$) \$965.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 829/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name TEXAS PROGRESSIVE CAUCUS
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6 Amount (\$) \$350.53 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS PROGRESSIVE CAUCUS
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Amount (\$) \$76.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name TEXAS PROGRESSIVE CAUCUS
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Amount (\$) \$150.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 830/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name TEXAS PROGRESSIVE CAUCUS	
6 Amount (\$) \$2,057.36 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2024	Candidate/Officeholder name TEXAS PROGRESSIVE CAUCUS	
Amount (\$) \$172.85 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 59 LAMPASAS, TX 76550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2024	Candidate/Officeholder name TEXAS PROGRESSIVE CAUCUS	
Amount (\$) \$216.07 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 59 LAMPASAS, TX 76550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 831/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name TEXAS PROGRESSIVE CAUCUS	
6 Amount (\$) \$124.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 59 LAMPASAS, TX 76550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name TEXAS SENATE DEMOCRATIC CAUCUS	
Amount (\$) \$78.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1042 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name TEXAS SENATE DEMOCRATIC CAUCUS	
Amount (\$) \$11.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1042 AUSTIN, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 832/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TEXAS SENATE DEMOCRATIC CAUCUS
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1042 AUSTIN, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TEXAS SENATE DEMOCRATIC CAUCUS
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Amount (\$) \$7.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1042 AUSTIN, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TEXAS VICTORY FUND 2020 PAC
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Amount (\$) \$168.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 833/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name TEXAS VICTORY FUND 2020 PAC
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TEXAS VICTORY FUND 2020 PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TEXAS VICTORY FUND 2020 PAC
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Amount (\$) \$59.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 834/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name TEXAS VICTORY FUND 2020 PAC	
6 Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name TEXAS VICTORY FUND 2020 PAC	
Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name TEXAS VICTORY FUND 2020 PAC	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 835/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name TEXAS VICTORY FUND 2020 PAC
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6 Amount (\$) \$48.02	7 Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS VICTORY FUND 2020 PAC
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Amount (\$) \$23.52	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TEXAS VICTORY FUND 2020 PAC
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 3845 RANCH ROAD 2222 APT 4 AUSTIN, TX 78731-4866
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 836/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name TEXAS YOUNG DEMOCRATS PAC	
6 Amount (\$) \$389.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name TEXAS YOUNG DEMOCRATS PAC	
Amount (\$) \$558.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name TEXAS YOUNG DEMOCRATS PAC	
Amount (\$) \$91.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 837/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TEXAS YOUNG DEMOCRATS PAC
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6 Amount (\$) \$91.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TEXAS YOUNG DEMOCRATS PAC
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TEXAS YOUNG DEMOCRATS PAC
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Amount (\$) \$91.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 838/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TEXAS YOUNG DEMOCRATS PAC
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6 Amount (\$) \$91.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TEXAS YOUNG DEMOCRATS PAC
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Amount (\$) \$29.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TEXAS YOUNG DEMOCRATS PAC
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Amount (\$) \$547.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 839/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name TEXAS YOUNG DEMOCRATS PAC
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6 Amount (\$) \$115.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name THE 134 PAC
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Amount (\$) \$657.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name THE 134 PAC
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Amount (\$) \$196.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 840/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name THE 134 PAC
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6 Amount (\$) \$124.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name THE 134 PAC
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Amount (\$) \$129.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name THE 134 PAC
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Amount (\$) \$187.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 841/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name THE 134 PAC
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6 Amount (\$) \$557.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name THE 134 PAC
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Amount (\$) \$163.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name THE 134 PAC
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Amount (\$) \$144.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 842/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name THE 134 PAC
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6 Amount (\$) \$110.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name THE 134 PAC
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Amount (\$) \$504.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 357 MINERAL WELLS, TX 76068
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name THE BLACK WOMEN'S PAC
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Amount (\$) \$63.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 843/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name THE BLACK WOMEN'S PAC
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6 Amount (\$) \$19.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name THE BLACK WOMEN'S PAC
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Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name THE BLACK WOMEN'S PAC
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Amount (\$) \$29.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 844/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name THE BLACK WOMEN'S PAC
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6 Amount (\$) \$53.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name THE BLACK WOMEN'S PAC
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Amount (\$) \$38.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name THE BLACK WOMEN'S PAC
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Amount (\$) \$29.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 845/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name THE BLACK WOMEN'S PAC
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6 Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name THE BLACK WOMEN'S PAC
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Amount (\$) \$19.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 122072 ARLINGTON, TX 76012
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name THE CAROLYN SALTER CAMPAIGN
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Amount (\$) \$441.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 419 SOUTH ROYALL PALESTINE, TX 75801
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 846/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name THE CAROLYN SALTER CAMPAIGN
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6 Amount (\$) \$244.91 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 419 SOUTH ROYALL PALESTINE, TX 75801
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name THE CAROLYN SALTER CAMPAIGN
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Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 419 SOUTH ROYALL PALESTINE, TX 75801
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name THE DALLAS COUNTY EAST DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 870283 MESQUITE, TX 75150
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 847/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name THE DALLAS COUNTY EAST DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 870283 MESQUITE, TX 75150
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name THE DALLAS COUNTY EAST DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 870283 MESQUITE, TX 75150
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name THE DALLAS COUNTY EAST DEMOCRATS
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Amount (\$) \$24.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 870283 MESQUITE, TX 75150
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 848/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name THE DALLAS COUNTY EAST DEMOCRATS	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 870283 MESQUITE, TX 75150	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name Payee name THE MOLLY IVINS PROJECT, LLC PAC	
Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code P.O. BOX 836872 RICHARDSON, TX 75083	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2024	Candidate/Officeholder name Payee name THE REAL TEXAS PAC	
Amount (\$) \$52.79 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 849/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name THE REAL TEXAS PAC
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6 Amount (\$) \$190.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name THE REAL TEXAS PAC
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Amount (\$) \$21.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name THE REAL TEXAS PAC
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Amount (\$) \$180.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 850/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name THE REAL TEXAS PAC
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6 Amount (\$) \$167.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name THE REAL TEXAS PAC
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Amount (\$) \$62.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name THE REAL TEXAS PAC
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Amount (\$) \$123.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 851/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name THE REAL TEXAS PAC	
6 Amount (\$) \$74.42 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name THE REAL TEXAS PAC	
Amount (\$) \$154.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name THE REAL TEXAS PAC	
Amount (\$) \$47.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 852/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name THE REAL TEXAS PAC	
6 Amount (\$) \$3.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 15845 C/O MBA CONSULTING GROUP WASHINGTON, DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name THE SPRING DEMOCRATIC CLUB	
Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2327 PEACEFUL VALLEY DRIVE SPRING, TX 77373	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name THE SPRING DEMOCRATIC CLUB	
Amount (\$) \$6.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2327 PEACEFUL VALLEY DRIVE SPRING, TX 77373	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 853/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name THE SPRING DEMOCRATIC CLUB
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2327 PEACEFUL VALLEY DRIVE SPRING, TX 77373
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name THE SPRING DEMOCRATIC CLUB
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Amount (\$) \$6.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2327 PEACEFUL VALLEY DRIVE SPRING, TX 77373
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name THE SPRING DEMOCRATIC CLUB
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2327 PEACEFUL VALLEY DRIVE SPRING, TX 77373
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 854/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 10/27/2024	5 Payee name TOM GREEN COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$163.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name TOM GREEN COUNTY DEMOCRATIC PARTY	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name TOM GREEN COUNTY DEMOCRATIC PARTY	
Amount (\$) \$211.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 855/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TOM GREEN COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TOM GREEN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TOM GREEN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$211.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 856/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TOM GREEN COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name TOM GREEN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$163.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name TOM GREEN COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 450 SAN ANGELO, TX 76902
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 857/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name TONI ROSE CAMPAIGN ACCOUNT
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6 Amount (\$) \$33.61	7 Payee address; City; State; Zip Code PO BOX 41867 DALLAS, TX 75241
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name TONI ROSE CAMPAIGN ACCOUNT
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Amount (\$) \$960.50	Payee address; City; State; Zip Code PO BOX 41867 DALLAS, TX 75241
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TONI ROSE CAMPAIGN ACCOUNT
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Amount (\$) \$240.12	Payee address; City; State; Zip Code PO BOX 41867 DALLAS, TX 75241
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 858/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/17/2024	5 Payee name TONI ROSE CAMPAIGN ACCOUNT	
6 Amount (\$) \$1,224.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41867 DALLAS, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/01/2024	Candidate/Officeholder name TONI ROSE CAMPAIGN ACCOUNT	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 41867 DALLAS, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2024	Candidate/Officeholder name TONI ROSE CAMPAIGN ACCOUNT	
Amount (\$) \$5,282.75 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO BOX 41867 DALLAS, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 859/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name TONI ROSE CAMPAIGN ACCOUNT
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6 Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 41867 DALLAS, TX 75241
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TONY ADAMS FOR PEOPLE
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Amount (\$) \$144.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12022 BROWNWOOD DR FRISCO, TX 75035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TONY ADAMS FOR PEOPLE
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Amount (\$) \$14.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12022 BROWNWOOD DR FRISCO, TX 75035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 860/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name TONY ADAMS FOR PEOPLE
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6 Amount (\$) \$4.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 12022 BROWNWOOD DR FRISCO, TX 75035
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name TONY ADAMS FOR PEOPLE
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Amount (\$) \$6.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12022 BROWNWOOD DR FRISCO, TX 75035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TONY ADAMS FOR PEOPLE
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Amount (\$) \$2.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12022 BROWNWOOD DR FRISCO, TX 75035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 861/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$6,377.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$12,493.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$1,380.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 862/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$313.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$313.56 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$715.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 863/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$1,418.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$1,847.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY
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Amount (\$) \$284.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 864/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name TRAVIS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$180.43 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name TRAVIS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 684263 AUSTIN, TX 78768	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name TU VOZ PAC	
Amount (\$) \$4,802.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 56386 HOUSTON, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 865/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name TURN TEXAS BLUE PAC
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name TURN TEXAS BLUE PAC
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name TURN TEXAS BLUE PAC
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 866/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name TURN TEXAS BLUE PAC
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6 Amount (\$) \$76.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name TURN TEXAS BLUE PAC
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Amount (\$) \$57.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name TURN TEXAS BLUE PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 867/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name TURN TEXAS BLUE PAC
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name TURN TEXAS BLUE PAC
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Amount (\$) \$72.03	Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name TURN TEXAS BLUE PAC
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Amount (\$) \$62.42	Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 868/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name TURN TEXAS BLUE PAC
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 1006 BANISTER LANE APT 1001 AUSTIN, TX 78704
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name TURN TEXAS BLUE
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Amount (\$) \$48.02	Payee address; City; State; Zip Code 8926 WEST RD 114 HOUSTON, TX 77064
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name UNIVERSITY DEMOCRATS PAC
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Amount (\$) \$432.22	Payee address; City; State; Zip Code 907 W 23RD STREET APT D AUSTIN, TX 78705
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 869/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name UNIVERSITY DEMOCRATS PAC
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6 Amount (\$) \$513.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 907 W 23RD STREET APT D AUSTIN, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name UNIVERSITY DEMOCRATS PAC
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Amount (\$) \$432.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 907 W 23RD STREET APT D AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name UNIVERSITY DEMOCRATS PAC
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 907 W 23RD STREET APT D AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 870/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name UNIVERSITY DEMOCRATS PAC
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 907 W 23RD STREET APT D AUSTIN, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name UNIVERSITY DEMOCRATS PAC
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 907 W 23RD STREET APT D AUSTIN, TX 78705
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name UP NEXT
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Amount (\$) \$294.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6814 E. RIVERSIDE DR. UNIT 42 AUSTIN, TX 78741
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 871/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name UP NEXT
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6 Amount (\$) \$17.28 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6814 E. RIVERSIDE DR. UNIT 42 AUSTIN, TX 78741
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name UP NEXT
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Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6814 E. RIVERSIDE DR. UNIT 42 AUSTIN, TX 78741
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name UP NEXT
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Amount (\$) \$60.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6814 E. RIVERSIDE DR. UNIT 42 AUSTIN, TX 78741
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 872/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/22/2024	5 Payee name UP NEXT	
6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6814 E. RIVERSIDE DR. UNIT 42 AUSTIN, TX 78741	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name UP NEXT	
Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6814 E. RIVERSIDE DR. UNIT 42 AUSTIN, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name VAN ZANDT COUNTY DEMOCRATIC PARTY	
Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 217 CANTON, TX 75103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 873/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name VAN ZANDT COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 217 CANTON, TX 75103
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name VAN ZANDT COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 217 CANTON, TX 75103
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name VAZQUEZ JR., ARMANDO
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Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1712 TIMBER RIDGE ROAD AUSTIN, TX 78741
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 874/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/11/2024	5 Payee name VAZQUEZ JR., ARMANDO	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1712 TIMBER RIDGE ROAD AUSTIN, TX 78741	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2024	Payee name VAZQUEZ JR., ARMANDO	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1712 TIMBER RIDGE ROAD AUSTIN, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2024	Payee name VAZQUEZ JR., ARMANDO	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1712 TIMBER RIDGE ROAD AUSTIN, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 875/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/11/2024	5 Payee name VAZQUEZ JR., ARMANDO
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6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1712 TIMBER RIDGE ROAD AUSTIN, TX 78741
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2024	Payee name VAZQUEZ JR., ARMANDO
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Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1712 TIMBER RIDGE ROAD AUSTIN, TX 78741
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name VENTON FOR TEXAS
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Amount (\$) \$3.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 876/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name VENTON FOR TEXAS
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6 Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2024	Payee name VENTON FOR TEXAS
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Amount (\$) \$2,401.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name VENTON FOR TEXAS
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Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 877/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/05/2024	5 Payee name VENTON FOR TEXAS	
6 Amount (\$) \$1,104.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2024	Payee name VENTON FOR TEXAS	
Amount (\$) \$5,306.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2024	Payee name VENTON FOR TEXAS	
Amount (\$) \$2,870.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 707 VERMONT AVE DALLAS, TX 75216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 878/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name VERTREES, STEPHANIE
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6 Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4803 SAGE HEN DR. AUSTIN, TX 78727
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name VIBRANT AUSTIN
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Amount (\$) \$292.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2392 AUSTIN, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name VIBRANT AUSTIN
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Amount (\$) \$3,164.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 2392 AUSTIN, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 879/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/05/2024	5 Payee name VICTOR TREVINO III FOR HARRIS COUNTY JUSTICE OF THE PEACE FOR PRECINCT 6, PLACE 1	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1406 GODWIN ST HOUSTON, TX 77023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name VICTORIA COUNTY DEMOCRATIC PARTY	
Amount (\$) \$57.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 4423 VICTORIA, TX 77903-4423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name VICTORIA COUNTY DEMOCRATIC PARTY	
Amount (\$) \$100.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 4423 VICTORIA, TX 77903-4423	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 880/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name VICTORIA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 4423 VICTORIA, TX 77903-4423
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name VICTORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 4423 VICTORIA, TX 77903-4423
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name VICTORIA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 4423 VICTORIA, TX 77903-4423
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 881/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name VICTORIA COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 4423 VICTORIA, TX 77903-4423	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name VIKKI GOODWIN CAMPAIGN FUND	
Amount (\$) \$326.57 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9901 BRODIE LN STE 160-315 AUSTIN, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name VIKKI GOODWIN CAMPAIGN FUND	
Amount (\$) \$288.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9901 BRODIE LN STE 160-315 AUSTIN, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 882/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name VIKKI GOODWIN CAMPAIGN FUND
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6 Amount (\$) \$96.04	7 Payee address; City; State; Zip Code 9901 BRODIE LN STE 160-315 AUSTIN, TX 78748
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name VINCENT PEREZ CAMPAIGN
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Amount (\$) \$6.72	Payee address; City; State; Zip Code P.O. BOX 71309 EL PASO, TX 79917
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name VINCENT PEREZ CAMPAIGN
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Amount (\$) \$2,401.25	Payee address; City; State; Zip Code P.O. BOX 71309 EL PASO, TX 79917
<input type="checkbox"/> Expenditure from corporate funds	

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 883/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name VOTE TEXAS
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1101 BROADWAY SAN ANTONIO, TX 78215
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name VOTE VENABLE D17
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Amount (\$) \$312.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name VOTE VENABLE D17
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Amount (\$) \$182.47 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 884/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name VOTE VENABLE D17
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6 Amount (\$) \$19.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name VOTE VENABLE D17
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name VOTE VENABLE D17
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 885/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/01/2024	5 Payee name VOTE VENABLE D17
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6 Amount (\$) \$48.01	7 Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name VOTE VENABLE D17
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Amount (\$) \$19.20	Payee address; City; State; Zip Code 120 MEADOWOOD DRIVE BASTROP, TX 78602
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name VOVK, JANE
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Amount (\$) \$10.00	Payee address; City; State; Zip Code 5307 SENDERO SPRINGS DR ROUND ROCK, TX 78681
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 886/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name WALKER COUNTY DEMOCRAT CLUB
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6 Amount (\$) \$72.03	7 Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name WALKER COUNTY DEMOCRAT CLUB
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Amount (\$) \$9.60	Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name WALKER COUNTY DEMOCRAT CLUB
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Amount (\$) \$48.02	Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 887/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name WALKER COUNTY DEMOCRAT CLUB
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WALKER COUNTY DEMOCRAT CLUB
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name WALKER COUNTY DEMOCRAT CLUB
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 888/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name WALKER COUNTY DEMOCRAT CLUB
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6 Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name WALKER COUNTY DEMOCRAT CLUB
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Amount (\$) \$72.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O BOX 6744 HUNTSVILLE, TX 77342
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WALLER COUNTY DEMOCRATIC PARTY
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Amount (\$) \$96.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1152 HEMPSTEAD, TX 77445
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 889/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/01/2024	5 Payee name WALLER COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1152 HEMPSTEAD, TX 77445	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2024	Candidate/Officeholder name WALTER COPPAGE CAMPAIGN	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. BOX 9827 WICHITA FALLS, TX 76308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/27/2024	Candidate/Officeholder name WARD, M	
Amount (\$) \$4.16 <input type="checkbox"/> Expenditure from corporate funds	Office sought 13808 GOLDEN FLAX TRAIL PFLUGERVILLE, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 890/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$25.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$552.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$168.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 891/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$230.52 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$25.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 892/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$25.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name WASHINGTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$192.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 903 BRENHAM, TX 77834
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 893/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/27/2024	5 Payee name WAY TO LEAD TEXAS
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6 Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 1701 CENTREVILLE, VA 20122
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WEBB COUNTY DEMOCRATIC PARTY
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Amount (\$) \$52.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name WEBB COUNTY DEMOCRATIC PARTY
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Amount (\$) \$148.87 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 894/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name WEBB COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name WEBB COUNTY DEMOCRATIC PARTY
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Amount (\$) \$43.22	Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WEBB COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61	Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 895/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name WEBB COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name WEBB COUNTY DEMOCRATIC PARTY
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Amount (\$) \$52.82	Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name WEBB COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.01	Payee address; City; State; Zip Code 1802 HOUSTON ST. LAREDO, TX 78040
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 896/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/06/2024	5 Payee name WEBB, LARRY
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4567 BELA VISTA DR POLLOCK PINES, CA 95726
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name WEBB, R
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 144 MERIDIAN BLVD QUEENS, NY 11692
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name WEISBART, JAN
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Amount (\$) \$27.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9621 LOCKFORD STREET LOS ANGELES, CA 90035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 897/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 10/30/2024	5 Payee name WEISBART, JAN
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6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 9621 LOCKFORD STREET LOS ANGELES, CA 90035
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name WEISBART, JAN
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Amount (\$) \$27.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9621 LOCKFORD STREET LOS ANGELES, CA 90035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name WEISS, EDWARD
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Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 850 MIDDLEFIELD ROAD SUITE 2 PALO ALTO, CA 94301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 898/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/03/2024	5 Payee name WEST HOUSTON DEMOCRATIC CLUB
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6 Amount (\$) \$124.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2024	Payee name WEST HOUSTON DEMOCRATIC CLUB
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Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name WEST HOUSTON DEMOCRATIC CLUB
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Amount (\$) \$480.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 899/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name WEST HOUSTON DEMOCRATIC CLUB
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6 Amount (\$) \$297.73 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name WEST HOUSTON DEMOCRATIC CLUB
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Amount (\$) \$672.31 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name WEST HOUSTON DEMOCRATIC CLUB
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Amount (\$) \$38.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 900/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/29/2024	5 Payee name WEST HOUSTON DEMOCRATIC CLUB	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13114 WALDEMERE DR HOUSTON, TX 77077	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name WEST U DEMOCRATS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3920 MILTON ST HOUSTON, TX 77005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name WEST U DEMOCRATS	
Amount (\$) \$240.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3920 MILTON ST HOUSTON, TX 77005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 901/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/10/2024	5 Payee name WEST U DEMOCRATS	
6 Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3920 MILTON ST HOUSTON, TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name WEST U DEMOCRATS	
Amount (\$) \$2.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3920 MILTON ST HOUSTON, TX 77005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name WEST U DEMOCRATS	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3920 MILTON ST HOUSTON, TX 77005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 902/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name WEST U DEMOCRATS
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6 Amount (\$) \$2.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3920 MILTON ST HOUSTON, TX 77005
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name WESTERN WILCO DEMOCRATS CLUB
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Amount (\$) \$336.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/17/2024	Payee name WESTERN WILCO DEMOCRATS CLUB
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 903/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name WESTERN WILCO DEMOCRATS CLUB	
6 Amount (\$) \$456.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name WESTERN WILCO DEMOCRATS CLUB	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name WESTERN WILCO DEMOCRATS CLUB	
Amount (\$) \$192.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 904/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name WESTERN WILCO DEMOCRATS CLUB
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name WESTERN WILCO DEMOCRATS CLUB
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Amount (\$) \$96.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10908 TALL OAK TRL AUSTIN, TX 78750
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2024	Payee name WESTON, DAVID
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Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4500 WINDSONG ST SACRAMENTO, CA 95834
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 905/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/16/2024	5 Payee name WESTON, DAVID	
6 Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4500 WINDSONG ST SACRAMENTO, CA 95834	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name WESTSIDE DEMOCRATS OF EL PASO	
Amount (\$) \$256.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name WESTSIDE DEMOCRATS OF EL PASO	
Amount (\$) \$21.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 906/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name WESTSIDE DEMOCRATS OF EL PASO
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6 Amount (\$) \$213.22	7 Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name WESTSIDE DEMOCRATS OF EL PASO
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Amount (\$) \$28.81	Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WESTSIDE DEMOCRATS OF EL PASO
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Amount (\$) \$45.14	Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 907/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name WESTSIDE DEMOCRATS OF EL PASO
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6 Amount (\$) \$67.23	7 Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name WESTSIDE DEMOCRATS OF EL PASO
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Amount (\$) \$81.64	Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name WESTSIDE DEMOCRATS OF EL PASO
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Amount (\$) \$4.80	Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 908/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name WESTSIDE DEMOCRATS OF EL PASO
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6 Amount (\$) \$43.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4216 ROXBURY DR EL PASO, TX 79922
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name WHARTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 217 N RESIDENT ST WHARTON, TX 77488
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name WHARTON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 217 N RESIDENT ST WHARTON, TX 77488
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 909/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name WICHITA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3308 KEMP ST STE 1 WICHITA FALLS, TX 76309
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name WICHITA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$48.02 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3308 KEMP ST STE 1 WICHITA FALLS, TX 76309
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name WICHITA COUNTY DEMOCRATIC PARTY
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Amount (\$) \$100.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3308 KEMP ST STE 1 WICHITA FALLS, TX 76309
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 910/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name WICHITA COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$46.09 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3308 KEMP ST STE 1 WICHITA FALLS, TX 76309
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2024	Payee name WILDMAN, JANICE
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Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5131 BELLERIVE DRIVE DALLAS, TX 75287
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4,549.63 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 911/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$2,360.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$2,437.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$1,225.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 912/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$2,310.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$2,154.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$4,210.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 913/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/15/2024	5 Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$886.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$406.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY
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Amount (\$) \$328.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 914/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name WILLIAMSON COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$125.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1296 GEORGETOWN, TX 78627	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name WILLIAMSON COUNTY YOUNG DEMOCRATS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name WILLIAMSON COUNTY YOUNG DEMOCRATS	
Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 915/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/31/2024	5 Payee name WILLIAMSON COUNTY YOUNG DEMOCRATS	
6 Amount (\$) \$4.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 13224 MARRERO DR AUSTIN, TX 78729	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name WILLIE, KATHERINE	
Amount (\$) \$7.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 CEDAR LANE ANNAPOLIS, MD 21403	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name WILSON COUNTY DEMOCRATIC PARTY	
Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 756 FLORESVILLE, TX 78114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 916/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/22/2024	5 Payee name WILSON COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$5.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 756 FLORESVILLE, TX 78114
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2024	Payee name WILSON, WALTER
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Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 538 BROOK LN ST CLOUD, MN 56301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REFUND OF POLITICAL CONTRIBUTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REFUND OF POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WIMBERLEY DEMOCRATS
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Amount (\$) \$14.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1866 WIMBERLEY, TX 78676
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 917/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name WIMBERLEY DEMOCRATS
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6 Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1866 WIMBERLEY, TX 78676
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name WIMBERLEY DEMOCRATS
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1866 WIMBERLEY, TX 78676
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WISE COUNTY DEMOCRATIC PARTY
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Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 918/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/03/2024	5 Payee name WISE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name WISE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2024	Payee name WISE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$67.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 919/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 11/24/2024	5 Payee name WISE COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name WISE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name WISE COUNTY DEMOCRATIC PARTY	
Amount (\$) \$100.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 920/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/29/2024	5 Payee name WISE COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 116 DECATUR, TX 76234
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WOMEN IN NOVEMBER (W.I.N.)
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Amount (\$) \$480.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name WOMEN IN NOVEMBER (W.I.N.)
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Amount (\$) \$168.08 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 921/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name WOMEN IN NOVEMBER (W.I.N.)
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6 Amount (\$) \$989.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name WOMEN IN NOVEMBER (W.I.N.)
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Amount (\$) \$33.61 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WOMEN IN NOVEMBER (W.I.N.)
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Amount (\$) \$38.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 922/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/08/2024	5 Payee name WOMEN IN NOVEMBER (W.I.N.)
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6 Amount (\$) \$96.05	7 Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2024	Payee name WOMEN IN NOVEMBER (W.I.N.)
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Amount (\$) \$4.80	Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2024	Payee name WOMEN IN NOVEMBER (W.I.N.)
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Amount (\$) \$24.00	Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 923/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 12/31/2024	5 Payee name WOMEN IN NOVEMBER (W.I.N.)
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6 Amount (\$) \$24.01	7 Payee address; City; State; Zip Code 15918 CAVENDISH DR. HOUSTON, TX 77059
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name WOOD COUNTY EXECUTIVE COMMITTEE
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Amount (\$) \$146.94	Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/03/2024	Payee name WOOD COUNTY EXECUTIVE COMMITTEE
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Amount (\$) \$9.60	Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 924/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/17/2024	5 Payee name WOOD COUNTY EXECUTIVE COMMITTEE
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6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/24/2024	Payee name WOOD COUNTY EXECUTIVE COMMITTEE
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name WOOD COUNTY EXECUTIVE COMMITTEE
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Amount (\$) \$67.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 925/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
4 Date 12/15/2024	5 Payee name WOOD COUNTY EXECUTIVE COMMITTEE	
6 Amount (\$) \$24.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2024	Payee name WOOD COUNTY EXECUTIVE COMMITTEE	
Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2024	Payee name WOOD COUNTY EXECUTIVE COMMITTEE	
Amount (\$) \$67.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. BOX 1455 QUITMAN, TX 75783	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 926/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/24/2024	5 Payee name YOUNG COUNTY DEMOCRATIC PARTY
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6 Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 311 BROADWAY AVE PO BOX 91 NEWCASTLE, TX 76372
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/22/2024	Payee name YOUNG COUNTY DEMOCRATIC PARTY
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Amount (\$) \$24.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 311 BROADWAY AVE PO BOX 91 NEWCASTLE, TX 76372
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name YOUNG DEMOCRATS OF DENTON COUNTY
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Amount (\$) \$9.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1504 MISSION HILLS LN CORINTH, TX 76210
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 927/927 Rpt:	2 FILER NAME ActBlue Texas	3 Filer ID (Ethics Commission Filers) 00059791
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4 Date 11/10/2024	5 Payee name YOUNG DEMOCRATS OF DENTON COUNTY
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6 Amount (\$) \$19.21 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1504 MISSION HILLS LN CORINTH, TX 76210
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2024	Payee name YVETTE JOHNSON FOR TEXAS
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Amount (\$) \$242.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6333 DEWBERRY DRIVE FRISCO, TX 75035
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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